

MONTGOMERY COUNTY DEPARTMENT OF SOCIAL SERVICES

102 East Spring Street ♦ Drawer N ♦ Troy, NC 27371 ♦ (910) 576-6531 ♦ Fax (910) 576-5016

CONTENTS

Message from the County Director

ADMINISTRATION

- Agency Operations - Frequently Asked Questions (FAQ's)
- Administrative Support Services
- DSS Staff Attorney

ECONOMIC SERVICES DIVISION

- Medicaid (Medical Assistance) Program
 - Family and Children Medicaid
 - NC Health Choice (NCHC)
 - Adult Medicaid
 - Medicaid for Long Term Care (LTC)
 - Adult Medicaid - FREQUENTLY ASKED QUESTIONS (FAQ's)
- Work First Program – Montgomery County Welfare Reform
 - Work First Family Assistance (WFFA)
 - Work First Employment Services
 - Work First Program - Frequently Asked Questions (FAQ's)
- Child Care Services
 - Subsidized Child Care Program - Local Payment Policies
- Food Stamp Program
 - Food Stamp Program - Frequently Asked Questions (FAQ's)
- Program Integrity (Fraud Investigations & Claims Collections)
- Energy Assistance Programs
- Child Support Enforcement Program
 - Child Support - Frequently Asked Questions (FAQ's)
 - Child Support – Glossary of Terms

HUMAN SERVICES DIVISION

- Children & Family Services Program
 - Child Protective Services - Investigations
 - Child Protective Services - Family Casemanagement Services
 - Children & Family Services: Foster Home Licensing & Placement
 - Children & Family Services: Adoptions
- Adult Services Program
 - Adult Social Services: Protective Services
 - Adult Social Services: Adult Care Homes (ACH) Licensing & Monitoring
 - Adult Social Services: Guardianship
- Medicaid Transportation

MONTGOMERY COUNTY EMPLOYEE BENEFIT PACKAGE

DISCLAIMER

MESSAGE FROM THE COUNTY DIRECTOR

On behalf of our outstanding and dedicated employees, it is with pleasure and pride that I welcome you to the Montgomery County Department of Social Services (MCDSS) website. Our Department and our partner agencies are committed to creating new and innovative ways to serve those in need in our County, as well as reaching out to prospective employees, the media and the general public. We are pleased that you are interested in learning more about the county's largest department. The Montgomery County Department of Social Services employs approximately 60 people with an annual total operating budget of more than \$35 million, all working toward the goal of making lives better for the citizens of Montgomery County.

These are exciting and challenging times for social service agencies. We are called upon to address the critical needs of our customers and at the same time accommodate the harsh realities of fiscal responsibility. I hope you will find our site both informative and user friendly. There is a great deal of information contained within the following pages about the department, its programs and services. As you view our site, you will see that our broad array of services affects the lives of thousands of Montgomery County citizens of all communities, ages and income levels.

We protect children who have been victims of devastating abuse and neglect. We provide children with safe and nurturing homes when they cannot live with their families. We help families move toward economic independence. We help people find employment and be able to leave public assistance. We help families and individuals meet their basic needs for food and medical assistance. And we help elderly residents to remain safe and independent in the community. We accomplish all this and much more by working in concert with those we serve and our many governmental, nonprofit, business and community partners.

More than ever before, we need the involvement of the whole community to do this important work. We challenge you to become involved in our efforts. If you are not already one of our foster parents, one of our transportation volunteers, one of our partner organizations, or one of our supporters, we need you to join us as we continue to build stronger families and individual citizens in Montgomery County.

James S. "Jim" Sanders
County Director
Montgomery County DSS
Email: jim.sanders@ncmail.net

Administration

North Carolina has a system of state-supervised, county-administered departments of social services responsible for the provision of public assistance and social services programs for citizens of North Carolina. Generally, these county departments act as agents of the State under the supervision of the [State Division of Social Services](#) and the [NC Department of Health and Human Services](#). However, county DSS offices are a part of local government and its employees are county employees.

Each county, except Mecklenburg and Wake, has a county Board of Social Services responsible for establishing county policies, in conformity with state rules and regulations. Typically, the Board consists of five members, two chosen by the State Social Services Commission, two chosen by the County Board of Commissioners, and the fifth member selected by the other four members.

Members of the Montgomery County Board of Social Services as of 12-03 are:

- Wallace Jones, Chair (Appointed by County Commissioners)
- Sally Morris, Vice-Chair (Appointed by County Commissioners)
- Bertha Cagle, Member (Appointed by Social Services Commission)
- Mike Wray, Member (Appointed by Social Services Commission)
- Becky Stegall, Member (Appointed by County DSS Board)

Usually, a County Commissioner fills one of the Board of Commissioner slots in order to improve communication and coordination. (Commissioner Sally Morris currently fills this position.) The County Board of Social Services meets monthly in open session to conduct necessary business.

One of the most important rules of the Social Services Board is the selection of the County Department of Social Services Director. The Director, both directly and through staff, administers the programs of the agency. [NC General Statutes 108A-14](#) specifies fourteen duties and responsibilities of the Director, including the hiring of staff. Chapter 108A outlines the basic organizational operations of County Social Services.

The Montgomery County Board of Commissioners with administrative input from the County Manager also plays an important role in relation to Social Services. Their primary responsibility is to provide necessary county funds and approval of the Department of Social Services budget. Social Services programs are financed by a complex, activity/program-specific blend of federal, state, and county funding. Available federal and state funding for programs ranges from 100% funded to no financial participation.

The total budget for Social Services for FY 02-03 exceeded \$35 million. Not all of these funds flow through the county budget. The federal government provides approximately 59% of the necessary funding. State government provides approximately 27% and county government approximately 14% of necessary funding.

Over \$25 million of the Social Services budget goes to fund Medicaid. This program provides needed medical insurance to a variety of groups. Most expenditures are for prescribed drugs and nursing home and hospital care for the elderly and disabled.

AGENCY OPERATIONS - FREQUENTLY ASKED QUESTIONS (FAQ'S)

Q. How do I apply for benefits/services?

A. Applications for most benefits and services are taken at the agency Monday - Friday from 8:00 a.m. - 5:00 p.m. Crisis applications are taken Monday - Friday from 8:00 a.m. - 4:30 p.m. Call the agency at 910-576-6531 for further assistance, if you are unable to come to the agency.

Q. What documents do I need to bring when applying for benefits/services?

A. You do not have to bring any item with you to apply for most benefits. However, you will be asked to provide information in order to process your application. Some things you may be asked to provide include:

Child Care:

Employee Wage Information Form for Child Care (available at the front desk or online by clicking the [hyperlink](#))

Child Support Verification Form for Child Care (available at the front desk or online by clicking the [hyperlink](#))

One month of pay stubs

School schedule

*A completed Employee Wage Information Form for Child Care or a school schedule is required before applying for Child Care.

Food Stamps:

Photo Identification

Birth Certificates for all household members

Social Security Numbers for all household members

Verification of income of any kind

Verification of rent or mortgage

Verification of current utilities

Proof of Legal Alien Status, if applicable

Medicaid:

Recent medical expenses

Proof of any income

Bank statements and account numbers

Life Insurance policies

Social Security Number

Health Insurance policies

Proof of Legal Alien Status, if applicable

Verification of pregnancy

Birth Certificates for family members

Work First:

Birth Certificates for family members

Social Security Numbers for family members

Proof of any income

Verifications of any assets such as bank accounts, insurance policies, property, etc.

Proof of Legal Alien Status, if applicable

Q. When is the best time to come in to apply?

A. Applications for programs are taken on a "first come, first served" basis. Also, various programs use appointments. The agency opens at 8:00 a.m. It is usually best to arrive as early as possible. The agency accepts applications for most programs anytime, **but it is best to arrive by 4:00 p.m. if possible in order to complete the application.** Crisis applications are not accepted after 4:30 p.m. The agency does not close for lunch but there is sometimes a longer wait during lunch hours or shortly after, since there is fewer staff available to take applications.

Q. Do I need an appointment?

A. You do not need an appointment to make an application. Applications are accepted on a "first come, first served" basis. If you are already receiving benefits/services and would like to see your worker, it is best to call your worker first to make sure they will be available.

Q. Can I make an appointment to make an application?

A. Most applications are taken on a "first come, first served" basis. If you need special arrangements or an appointment, please call the agency at 910-576-6531 for further assistance.

Q. Are interpreter services available?

A. Free interpreter services are available for anyone who speaks little or no English. Come to the agency and arrangements will be made with a staff member who can provide free interpreter services.

Q. How do I get a work permit for a minor?

A. Work permits are provided at the agency on behalf of the [NC Department of Labor](http://www.dol.state.nc.us/wh/ycertif.htm). They are available at the front desk. They are also available online at <http://www.dol.state.nc.us/wh/ycertif.htm>.

Q. Do I need a work permit?

A. Work permits are required for any youth under the age of 18. A new work permit is needed for each job a youth works until they turn 18. For more information about work permits contact the [NC Department of Labor](http://www.dol.state.nc.us/wh/ycertif.htm) at 1-800-LABOR-NC or online at <http://www.dol.state.nc.us/wh/ycertif.htm>.

Q. What jobs are minors permitted to work?

A. For information on work restrictions for minors, contact the [NC Department of Labor](http://www.dol.state.nc.us/wh/ycertif.htm) at 1-800-LABOR-NC or online at <http://www.dol.state.nc.us/wh/ycertif.htm>. Work restrictions for minors are also listed on the work permit.

Q. How do I find a child care facility?

A. The [NC Division of Child Development](http://www.ncchildsupport.com) provides a child care facility search site online. Here you can search for a child care facility as well as obtain contact information and view detailed reports for each facility. For more information on finding a child care facility, contact a Child Care Worker in the Work First Unit by calling the agency at 910-576-6531.

Q. Where can I find help obtaining child support?

A. Contact the local Child Support Enforcement Agency at 910-576-6531. The local Child Support Enforcement Agency is located at the DSS Office in Troy. You can also contact the Child Support Customer Service line at 1-800-992-9457 or by email by visiting www.ncchildsupport.com.

Q. How do I get a PIN for my EBT card?

A. After you are approved for benefits you must attend an EBT class. EBT classes are held at the agency every Monday at 8:15 a.m. and Friday at 2:45 p.m. Contact the agency since times are subject to change. You must have your EBT card with you. You will select a PIN (Personal Identification Number) for your EBT card at the class. You do not need an appointment to attend an EBT class.

Q. How do I report abuse or neglect?

A. To report the abuse or neglect of a **child or adult** contact a Protective Services Intake Unit Social Worker or call the agency at 910-576-6531. You may also come to the agency to make a report. All reports are confidential and you do not have to give your name. For after hours emergencies call **911**.

Q. How do I become a foster parent?

A. Information on becoming a foster parent in North Carolina is available online at www.dhhs.state.nc.us/docs/foster.htm. Call the agency at 910-576-6531 if you are interested in becoming a foster parent.

Q. How do I report fraud?

A. To report fraud contact a Program Integrity Fraud Investigator or call the agency at 910-576-6531. You may also contact the State Program Integrity Branch of Economic Independence Services at 1-800-662-7030 Monday - Friday between the hours of 8:00 a.m. and 5:00 p.m. All reports are confidential and you do not have to give your name.

Q. I haven't received my Medicaid card - what do I do?

A. You should receive your Medicaid card by the fifth working day of the month. Contact your caseworker or call the agency at 910-576-6531 if you do not receive your card. Your card may have been sent back to the agency if your address has changed. Medicaid cards are not forwarded. Always notify your caseworker if you have a change of address.

Q. How do I change my Carolina Access doctor?

A. Contact your caseworker or call the agency at 910-576-6531 if you would like to change your Carolina Access doctor.

Q. How do I apply for a job at Montgomery County DSS?

A. Applications for positions at Montgomery County DSS are accepted by the DSS Office in the Montgomery County Administration Building located at 102 E. Spring St., Troy, NC 27371. Vacancies are posted on the county web site with instructions and are listed with the Troy Office of the Employment Security Commission. For more information contact the DSS Personnel Assistant at 910-576-6531 or visit the county web site.

For more information, contact:

Susan Allen, DSS Personnel Assistant
Email: susan.allen@ncmail.net

Q. What is the Raleigh number for Social Services information?

A. Voice/Español (North Carolina Only): 1-800-662-7030 (The CARE-LINE)
TTY Dedicated - Local and Toll Free: 919-733-4851 or 1-877-452-2514
For Out of State Calls: 919-733-4261
FAX: 919-715-8174
Postal address: 2012 Mail Service Center, Raleigh, NC 27699-2012
Email: care.line@ncmail.net

ADMINISTRATIVE SUPPORT SERVICES

Administrative Support staff greets the public, in person and by telephone, and guides them to programs and services offered by the agency. They respond to initial inquiries and requests for assistance. When appropriate staff issues work permits to youths 14 - 17 years old. Staff provides accounting, administrative, and clerical support services to the agency programs and staff.

Work Permits:

[North Carolina Department of Labor - Obtaining a Youth Employment Certificate](#)

For more information, contact:

Sandra Cagle, Business Manager

Email: sandra.cagle@ncmail.net

DSS STAFF ATTORNEY

In addition to significant Child Support Enforcement Program legal duties, the DSS Staff Attorney represents the Department in court cases where the agency seeks protection for abused or neglected children or disabled adults. The Juvenile Court Judges determine whether DSS has clear, cogent and convincing proof of allegations that children are abused, neglected and/or dependent. If so, the Juvenile Court then decides how the juveniles can best be protected, whether they should be placed temporarily in foster care or elsewhere, and the conditions necessary for the parents to be reunified with their children. The Clerk of Superior Court presides over adult guardianship matters. The Clerk determines whether a disabled adult is incompetent, and if so, whom can best serve as guardian for the individual's person and estate. In most cases involving DSS, responsibility for this service is assigned to the DSS County Director.

The Attorney provides legal counsel to the Department on a variety of additional issues, including welfare fraud, contracts, and personnel matters; provides training for staff and keeps the agency's employees up-to-date on new legislation; acts as Ombudsman for the staff to assist them in resolving complaints or grievances; attends DSS Board and County Commissioner meetings to provide legal advice and assistance related to DSS matters; and serves as the agency's liaison with the entire legal community, including the various States and Federal Courts, the County Attorney and other attorneys in both the private and public sectors.

The DSS staff attorney provides independent professional judgment on the legal aspects of staff recommendations and works as a key member of the DSS Leadership Team.

For more information, contact:

Bob Lehrer, Staff Attorney

Email: bob.lehrer@ncmail.net

ECONOMIC SERVICES DIVISION

MEDICAID (MEDICAL ASSISTANCE) PROGRAM

Family and Children Medicaid

This program helps families or individuals with medical bills such as doctor fees, prescription drugs, hospital charges, and nursing home care. There are several different types of Medicaid (Medical Assistance). All have income limits, and some have resource limits. Your caseworker will explain these to you.

1. **Persons** who are eligible will get a Medicaid card each month. Medicaid can also cover medical bills from the three months before the month you apply.
2. **Families** with children through age 20. The parent can receive Medicaid if only one parent is in the home and the child is under age 19. Both parents can receive Medicaid if both are in the home, but one of the parents is out of work or has an illness or injury; unemployment and underemployment.
3. **Children** through age 20 who live with both parents or other adults.
4. **Individuals** through age 20 who live apart from their parents or other adults.
5. **Children** under age 1 whose parents' income is equal to or less than 185% of the poverty limit. The limit is higher than for older children. There is no resource limit.
6. **Children** from age 1 through age 5 whose parents' income is equal to or less than 133% of the poverty level. This limit is higher than for children ages 6 and over. There is no resource limit.
7. **Children** from age six through age 18 whose parents' income is equal to or less than 100% of the poverty level. There is no resource limit.
8. **Pregnant** women, with or without other children. The income limit is 185% of the poverty level. There is no resource limit.
9. **Newborn** child of a Medicaid authorized mother - Automatic coverage of newborn (M-AF or M-IC)

Family and Children Medicaid - FREQUENTLY ASKED QUESTIONS (FAQ'S)

Q. What is Medicaid?

A. Medicaid is a program that pays medical bills and prescriptions for eligible families who cannot afford the cost of health care. Federal, state and county taxes pay the program costs.

Q. Who is eligible?

A. In the Family Medicaid program, it may be a child/children and may or may not include the adult caretaker.

In short, some of the basic guidelines:

- Be under 19 (income eligible)
- Be under 21 and not living with a parent or considered emancipated (income & reserve eligible)
- Be pregnant (income eligible)
- Have minor children in the home for caretaker relative to receive. (income & reserve eligible).

Q. What are the basic eligibility criteria for children?

A. For a child 18 and younger, eligibility is based solely on the income of the financially responsible adult the child lives with. There are different income levels based on the age of the child as shown below in the income limit chart. There is no resource evaluation in this program. (Resources include money in the bank, vehicles, cash on hand, etc.) If the child does not meet the income guidelines in this program, then an evaluation can be made in another program with lower income limits, resource limits, and a deductible.

Q. Can an adult be covered in this program?

A. In order for the adult caretaker to receive in the Family Medicaid program, first of all, their child must be Medicaid eligible. Eligibility for the adult is based on the child. If there is an eligible child, then the adult can possibly receive. But, the income guidelines for an adult to receive are much lower than for the child. Also, there is a resource evaluation that must be met for the adult to receive.

Q. Can a pregnant woman receive Medicaid who has no other children in the home?

A. Yes. There is a Medicaid program titled Medicaid for Pregnant Women (MPW). This program is based solely on the income of the pregnant woman and the father of the unborn if in the home. There are no resource limits in this program and the income limit is shown below. These income limits, referred to as poverty level, are established by Congress each fiscal year. This coverage begins with approval of an application and continues for two months after the birth of the baby. When the baby is born and birth reported the baby gets Medicaid automatically for one year.

Q. Can someone receive Medicaid if he/she is not a U.S. Citizen?

A. There are many factors to this question.

- If he/she is an Illegal Alien, the person can not receive full Medicaid. They may be eligible for Emergency Medicaid Services. Emergency Medicaid is determined by DMA (Division of Medical Assistance).
- If she is illegal and pregnant, she may be eligible for Presumptive Medicaid for the later part of the pregnancy. When an Illegal Alien delivers her child, she can then apply for Emergency Labor and Delivery Services. The baby would then be eligible for Automatic Newborn coverage for 1 year, since the child is a U.S. Citizen.
- If they are Lawful Permanent Residents (LPR) admitted to the U.S. on or after August 22, 1996 they are not eligible for full Medicaid for 5 years from the date they are admitted to the U.S. as an LPR. Residency status is determined by Immigration and Naturalization Services. This is a mandatory 5-year disqualification period. After the 5-year disqualification period has expired, LPR's are potentially eligible for full Medicaid just like U.S. citizens.
- If they are LPR under a political designation (ex. Refugee) admitted on or after August 22, 1996, they can only receive full Medicaid for the first 60 months they have entered this country. Refugees admitted before August 22, 1996 have been exempted from this.

Q. What is Retroactive Medicaid?

A. Someone who has medical bills in one or all 3 months prior to application date may apply for these bills, if all other eligibility factors are met

Q. What is Carolina Access?

A. Then Carolina Access Program links Medicaid recipients to a Primary Care Doctor for their health needs in their community. Dental or Eye doctors are excluded.

NC Health Choice (NCHC)

North Carolina Health Choice is health coverage that is to be provided under the federal Title XXI program, which was approved by the North Carolina General Assembly, signed into law by Governor Hunt and approved by the United States Health Care Financing Administration (HCFA). The program was implemented in October 1998, allowing families to obtain health coverage for their children who are otherwise ineligible for Medicaid and not covered by comprehensive health insurance.



In addition to family income eligibility, children must have been uninsured for two months prior to their application, unless the child has special needs that must be verified by a health care professional. It must be determined the child or children are not qualified for Medicaid.

There are essentially two countable income levels. If the family's countable income is at or below 150% of the federal poverty level, there is no fee required. If the family's countable income is at or below 200% of the federal poverty level, there is a fee of \$50.00 for one child and \$100.00 for two or more children.

Q. What is special about NC Health Choice?

A. Low-income families are able to get health insurance for their children. North Carolina's children's health insurance plan "NC Health Choice" will cover children from low-income families that make too much to qualify for Medicaid.

Why health insurance is important:

When working families cannot afford health care for their children, the consequences can be dire. Babies may not get the checkups that make sure they are growing healthy and strong. Families may wait until a child is very sick before seeking medical help, sometimes getting help only in an emergency. Untreated illnesses can have long-lasting consequences, such as hearing loss

caused by ear infections.

What it costs:

For families who make less than 150% of the federal poverty level, there will be no additional cost. For those families with an income greater than the levels listed below, there will be an annual cost of \$50 for one child and \$100 for two or more children. There will also be a co-payment levied per visit to physician, dentist, optometrist, clinic, outpatient hospital visit, etc.; per prescription for drugs; and for non-emergency emergency room visits. There will be no charge for anyone for well child and other preventive health visits.

What is covered:

This is a comprehensive health insurance plan which covers not only hospitalization but also outpatient care. Preventive dental, vision and hearing benefits are available. The following is a summary of benefits:

- *Hospital Care* - Semiprivate room, medications, laboratory tests, x-rays, surgeries, and professional care.
- *Outpatient care* - includes diagnostic services, therapies, laboratory services, X-rays, and outpatient services.
- *Physician and clinic services* - office visits; preventive services such as four well-baby visits up to one year of age, three visits per year between one and two years of age and one visit per year between 2 and 7, and once every three years between 7 and 19. Immunizations are covered.
- *Surgical services* - includes standard surgical procedures, related services, surgeon's fees, and anesthesia.
- *Prescription drugs*
- *Laboratory and radiology services*
- *Inpatient mental health services* - requires precertification
- *Outpatient mental health services* - requires precertification after 26 outpatient visits per year.
- *Durable medical equipment and supplies such as wheelchairs*
- *Vision*
- *Hearing*
- *Home health care* - limited to patients who are homebound and need care that can only be provided by licensed health care professionals or in the case that a physician certifies that the patient would otherwise be confined to a hospital or skilled nursing facility. Professional health care is covered; care provided by an unlicensed caregiver is not.
- *Nursing care*
- *Dental care* includes oral examinations, teeth cleaning, and scaling twice during a 12-month period, full mouth X-rays once every 60 months, bitewing X-rays of the back teeth once during a 12 month period and routine fillings.
- *Inpatient substance abuse treatment and outpatient substance abuse treatment* - is covered. See the mental health inpatient and outpatient notes above.
- *Physical therapy, occupational therapy and therapy for individuals with speech, hearing and language disorders*
- *Hospice care*
- *Special needs children with chronic mental or physical conditions or illness may receive services beyond those listed above if services are medically necessary and receive precertification.*

Once a child has been covered under this plan, should family economic conditions change so that the child is no longer eligible, but the family wants the child to continue in the program, the family will be allowed to purchase the plan at full premium for one year.

Applying for Health Choice insurance for your children:

A two page application form, income verification and enrollment fee (if required) are needed to approve the application. This application form will be made available at Social Services and Health Department. The application can be mailed in or taken to your county social services department. To expedite the process, come to Department of Social Services for a face to face interview. Each application will first be looked at to see if the child is eligible for Medicaid and, if not, then looked at to see if the child is eligible for the new program. If the child is found to be eligible, the application will be processed and the parents will receive a health card, a benefits booklet and instructions in the mail. Once parents are notified, the child is eligible to receive care.

Note: Unlike Medicaid, this program is limited by the amount of funds which are available. Therefore, it is open only to children on a first come, first served basis. Once the program is full, a waiting list will be taken, so it is in the best interest of the child to enroll as soon as it is possible. The state does feel that there are enough funds to cover all available children, however, there is no exact count of the numbers of uninsured children in the state. The state discourages families from dropping current health coverage in order to enroll in the new child health insurance plan. Every effort will be made to notify families through various media that this program exists and who is eligible.

Adult Medicaid

Adult Medicaid is a program that helps with medical bills such as doctor fees, prescription drugs, hospital charges, and nursing home care for eligible individuals that are aged, disabled, or blind. Income and resource limits apply. No money is paid to the client. The eligible client receives a Medicaid identification card through the mail to show the health care provider. Medicaid can also cover medical bills from up to 3 months prior to the month of application and in which there is a medical need.

The blue Medicaid identification card indicates the recipient is eligible for all Medicaid services. Each eligible family member has a specific recipient MID number; however, in some instances, not every member of the same family may be eligible for Medicaid. Family members are only eligible for Medicaid if their name and MID number appear on the card.

The buff Medicaid identification card indicates the recipient is eligible for the Medicare-Aid program. If Medicare covers the service, then Medicaid will pay the coinsurance and/or deductible. If Medicare denies the service, then Medicaid will also deny.

Adult Medicaid Eligibility Summary:

Medicaid benefits and eligibility vary according to a person's circumstances. Following is a brief explanation of eligibility for Medicaid and Medicare-Aid.

There are several different groups of individuals who qualify for Medicaid benefits. All have income limits and some have resource limits. Individuals who are eligible for full Medicaid benefits receive a Medicaid card each month. Medicaid may also be retroactive to cover medical bills from the 3 months prior to the month of application.

Medicaid for Aged (65 and older), Blind and Disabled Persons. The income limit is equal to 100% of the poverty level. There is a limit on resources.

Medicaid for Long Term Care (LTC)

Medicaid pays for medically necessary nursing home care for patients in skilled or intermediate care nursing homes or in intermediate care facilities for the mentally retarded. The patient's income must be less than the cost of care in the facility at the Medicaid rate, and there is a limit on resources. If the patient or his representative gives away assets or sells them for less than market value, he may be ineligible for payment of the cost of care. The sanction period is based upon the value of the assets transferred away. For more on long-term care, see FAQ's.

Financial Rules For Long Term Care Recipients

Medicaid pays for medically necessary nursing home care for patients in skilled or intermediate care nursing homes or in intermediate care facilities for the mentally retarded. The patient's income must be less than the cost of care in the facility at the Medicaid rate, and there is a limit on resources. If the patient or his representative gives away assets or sells them for less than market value, he may be ineligible for payment of the cost of care. The sanction period is based upon the value of the assets transferred away.

Financial Protection for a Spouse of a LTC Client

Medicaid policy specifies that when a legally married individual needs Medicaid to help pay for nursing facility services, a portion of the couple's income and assets may be protected for the spouse at home, the community spouse. The following is a summary of spousal protection rules:

- Medical services: nursing home care, hospital care that exceeds 30 days, or services provided by the Community Alternatives Program (services which enable an individual to remain at home who would otherwise be institutionalized)
- The community spouse is allowed to keep one half of the couple's assets, with a minimum of \$18,132 and a maximum of \$90,660 (current as of 1/1/2003).
- The protected share is calculated by assessing the value of all assets owned separately or jointly by either spouse at the point the individual becomes institutionalized. The homesite is generally not counted in determining the value of assets since the homesite is protected for the spouse.
- The nursing facility spouse must spend his half of the assets on his care prior to becoming Medicaid eligible. A nursing home recipient is allowed a maximum of \$2,000 in assets.
- The protected assets, including the homesite, must be transferred to the name of the community spouse.
- Once assets have been allocated following spousal impoverishment rules, and the spouse in the nursing facility is found eligible for Medicaid, spousal financial responsibility ends and each spouse will be treated separately for Medicaid purposes.
- A portion of a married institutionalized Medicaid recipient's income may also be allocated to the community spouse.
- Income is allocated for the needs of the community spouse if the community spouse's income is less than 150% of the poverty level (currently \$1,515). It is also possible to allocate additional income to the community spouse for excessive shelter costs.
- Income may also be allocated for the needs of other dependents.

Transfer of Assets in LTC Cases

Medicaid law prohibits the transfer of assets for less than market value by an institutionalized Medicaid applicant/recipient or anyone acting on their behalf.

- Certain transfers are allowable, such as the transfer of a homesite to a spouse or disabled child.
- The lookback period is 3 years (5 years for transfers to a trust) from the date of application or institutionalization, whichever occurs later.
- A sanction is applied for a period of time based on the value of the asset and begins the month the asset is transferred. The length of the sanction is determined by dividing the value of the transferred assets by the average monthly private cost for nursing home care (currently \$4,200). The sanction begins with the month of the transfer.
- During the sanction period the individual may be eligible for Medicaid but Medicaid will not pay for institutional services.

Estate Recovery in LTC Cases

- When a Medicaid recipient in a nursing home or receiving CAP services dies, Medicaid files a claim against the estate to recover expenses paid by Medicaid.
- Estate recovery is waived if there is a spouse or dependents who continue to live on the property, the total assets in the estate are less than \$5,000, Medicaid charges are less than \$3,000, or in cases of hardship.

Please be aware that eligibility rules and income/asset amounts are subject to frequent change. For further information regarding eligibility for Medicaid payment of long term care services, please contact the Montgomery County Department of Social Services, or call the NC DHHS Medicaid Eligibility Unit through the toll free CARE-LINE at 1-800-662-7030.

Automatic Eligibility for Medicaid:

Individuals who qualify for certain cash assistance programs automatically qualify for Medicaid without a separate application. If cash assistance ends, the Medicaid may be continued if the individual meets the eligibility criteria for another type of Medicaid. The programs which include automatic Medicaid are:

- * Supplemental Security Income (SSI) for elderly, blind and disabled individuals
- * State/County Special Assistance (SA) assistance for payment of rest home expenses for elderly, blind and disabled individuals

Medicare-Aid:

Individuals who have Medicare coverage may be eligible to have their Medicare premiums paid by Medicaid if their income is between 100% and 135% of the poverty level. There is a limit on resources.

Adult Medicaid - FREQUENTLY ASKED QUESTIONS (FAQ's)

Q. Can I receive Medicaid if I don't have children?

A. Adults (people who are age 21 and over) may be eligible for Medicaid if they are:

- Age 65 or older
- Blind
- Disabled
- The caretaker/relative of (living with and caring for) a child under age 19 who receives Medicaid (Refer to Work First Program)
- Pregnant (Refer to Work First Program)

Q. What is a deductible?

A. A deductible in Medicaid works much like a deductible for private insurance. A person is responsible for a certain amount of medical bills before insurance pays. The difference is that a Medicaid deductible is not a set dollar amount (such as \$100 or \$250). It is based upon the person's income. If income is more than a limit set by law there must be a deductible. The deductible is the amount of income over the income limit. A deductible can be for 1, 2 or 3 months before the month of application or for a period of 6 months beginning with the month you apply.

Q. How do I meet the deductible?

A. A Medicaid deductible is met by adding up medical costs on a day by day basis. When a Medicaid applicant pays or is billed for medical care, supplies and prescriptions, he has incurred these costs and may have them applied to his deductible. Only the portion of the bill that the person must pay can be applied to the deductible. (For example, a person with health insurance may only be responsible for 10% or \$50 of a \$500 bill. Fifty dollars is the amount that can be applied to meet the Medicaid deductible.) You can be authorized for Medicaid on the date that the bills add up to the amount of the deductible.

Q. Whose Income/Medical Bills are counted toward the deductible?

A. In Medicaid, your spouse's income must be counted in determining eligibility. Likewise, a parent's income must be counted when determining eligibility for a child. Because these individuals' income is counted, their medical bills may be applied to the Medicaid deductible. For additional information about deductibles, refer to the Medicaid Deductible Fact Sheet.

Q. How do I apply for Medicaid?

A. Contact the Montgomery County Department of Social Services (MCDSS) at (910) 576-6531 or visit the office at 102 E. Spring St. in Troy, NC. If you are unable to go to MC Social Services, you may request a home visit. If you have further questions regarding Medicaid eligibility after contacting the county department, call the NC Office of Citizen Services CARE-LINE Information and Referral Service toll-free at 1-800-662-7030 (Voice and Spanish) and someone will assist you. For local calls or calls from outside of North Carolina, dial (919) 733-4261. The Office of Citizen Services also has a dedicated TTY line at 1-877-452-2514 or for local TTY or TTY calls from outside of North Carolina, dial (919) 733-4851 for deaf and hearing impaired.

The NC Office of Citizen Services can also provide you with information and referrals on other Department of Health and Human Services programs along with other government and non-profit agencies that may be helpful, as well as tell you about prescription assistance programs available through drug manufacturers. (Office of Citizen Services – 1-800-662-7030 (Voice and Spanish); (919) 733-4261 (local or out of state calls); 1-877-452-2514 (TTY Dedicated) and (919) 733-4851 (TTY Dedicated for local or out of state calls).

Q. What do I need to take to apply for Medicaid?

A. You are not required to take anything with you when you apply for Medicaid. However, it is very helpful if you have your Social Security Number, proof of your income and information about your resources

(such as your bank account number and your insurance policy number.) If you are self-employed, your business records and/or tax records would be helpful.

Q. If my income is over the limits and I can't meet a deductible, are there other programs?

A. Yes, the following programs are for adults who have Medicare. These programs may be referred to as Medicare Savings Programs.

- The MQB-Q program (or Comprehensive Medicare-Aid) pays the Medicare Part A and B monthly premium, Medicare deductibles, and co-insurance.
- The MQB-B (or Limited Medicare-Aid) program and the MQB-E (Limited Medicare-Aid Capped Enrollment) program both pay the Medicare Part B monthly premium.
- MWD pays the Medicare Part A premium for disabled individuals who have lost eligibility for Medicare Part A due to earnings greater than the amount allowed by the Social Security Administration.
- Some individuals who live in nursing homes qualify for Medicaid to pay for their cost of care. In addition, some individuals who are in need of nursing care can receive benefits under the Community Alternatives Program (CAP), which enables the person to stay home and receive needed services. There are additional requirements that must be met to qualify for these extra services. For example, there must be documented proof that the individual has a medical need for the services.
- Some individuals in adult care homes (rest homes) are eligible for a check from the Special Assistance program to help pay for their care in the home. These individuals also receive Medicaid to help pay for their medical care.

Long Term Care - FREQUENTLY ASKED QUESTIONS (FAQ's)

Q. If a person goes into a nursing home, can that person keep his home?

A. There is no requirement in Medicaid policy to dispose of your home. Your local department of social services can provide more detail.

Q. How much income can a spouse who remains in the home keep?

A. The spouse at home can keep all of the income he/she receives for himself. Depending on his or her needs and income, the spouse may also receive a portion or all of the institutionalized spouse's income also. Refer to the Financial Rules for Long Term Care Recipients Fact Sheet for additional information about protection of resources and income for the spouse who remains at home.

Q. What is the asset limit for a person in the nursing facility? What is the asset limit for the spouse at home?

A. The asset limit for a person in the nursing facility is \$2,000. A married couple is not required to spend all of their assets down to \$2,000. In most circumstances, one-half of the total of all countable assets may be kept by the spouse at home. The limit on the maximum amount of assets that may be kept by the spouse at home changes annually. Certain assets such as the home, a car and all personal possessions are not countable assets. Further information can be found on the Financial Rules for Long Term Care Recipients Fact Sheet.

Q. What happens if a person gives away his property or assets and then needs help in paying for long term care?

A. Only under certain specific circumstances may assets be given away without penalty. The person in the nursing home may be ineligible for Medicaid to pay for cost of care in a nursing facility for a specific period of time.

Q. What does skilled level or intermediate level care mean?

A. Skilled level or SNF provides 24-hour skilled nursing care with a Registered Nurse (RN) or Licensed Practical Nurse (LPN) on duty at all times. Intermediate level or ICF provides 8 hours per day of nursing supervision by either a RN or LP.

Related Links:

North Carolina DHHS On-line Publications - Adult Medicaid

<http://info.dhhs.state.nc.us/olm/manuals/dma/abd/man/index.htm>

For more information, contact:

Phebe Corbett, Medicaid Unit Supervisor

Email: phebe.corbett@ncmail.net

WORK FIRST PROGRAM – MONTGOMERY COUNTY WELFARE REFORM

Work First is the cornerstone to reforming North Carolina's welfare system into a system that focuses on employment and self-sufficiency. Work First cannot be accomplished by government alone. Moving families off welfare and toward self-sufficiency requires the efforts of the entire community. It requires all families to sign a binding contract that details their plan for getting off welfare and commits them to taking care of their family. Work First sets strict time limits on benefits and applies tough sanctions on those families who refuse to meet their responsibilities.

Work First Family Assistance (WFFA)

Work First Family Assistance (WFFA) is a cash assistance, employment based program. Families found eligible will receive a monthly check, in addition to Medicaid and Food Stamps. Eligibility is based on income and reserve.



Emphasis on employment and personal responsibility begin at the application interview and are carried throughout the process.

Individuals are required to sign a Mutual Responsibility Contract during the application process. This contract states that the client agrees to:

- Get their children immunized
- Ensure that their children receive regular Medical check-ups
- School aged children attend school regularly
- Teen parents must live at home and stay in school
- Seek employment, unless exempt

Reserve limit: \$3,000.00

Income limit is based on the number of people included in the check

Main Points

- Every job has meaning and purpose. The focus of the program is **Employment** and **Short Term Financial Assistance**.
- Sets a federal lifetime limit of **60 cumulative months** during which welfare benefits may be received.
- North Carolina limits receipt of benefits to **24 cumulative months**, then terminates benefits for **36 months** before the family can receive again.
- **Sanctions** are imposed for non-compliance with the Personal Responsibility Contracts and/or non-compliance with Child Support.

Sanction Number	Sanction	Length of Sanction
First	50% Reduction of the Work First Check & Loss of Medicaid for Adult	3 months
Second and Subsequent	*Above Sanction & Pay after Performance	3 months

*(Pay after Performance requires the recipient to comply with the program requirements prior to receiving a check.)

Families must be given the opportunity to become independent. Under Work First, benefits are intended to be short term. Families are expected to work actively toward and share in the responsibility of becoming self-sufficient. To encourage work and make work pay, family members who work are allowed special work-related deductions.

Work First Employment Services

Employment Services are specially designed to help families seek, get, and maintain a job. Employment Services should assist each family to accomplish the following:

- Increase personal responsibility
- Remove barriers to employment
- Secure employment (See also [NC Employment Security Commission](#))
- Reduce long-term dependence on welfare programs

WORK FIRST PROGRAM - FREQUENTLY ASKED QUESTIONS (FAQ'S)

Q. Does the Work First Family Assistance Program provide any cash assistance?

A. Work First Family Assistance provides time-limited (60 Month & 24 Month) cash assistance to families and children under the age of 18. The Benefit Diversion Program, which is one of the Short Term Services and Benefits, also offers families one-time cash assistance. Under this Benefit Diversion Program families are also eligible to up to three months of Medicaid and Food Stamps to meet needs which are related to maintaining or accepting employment or for those who have experienced a short break between jobs.

Q. Whose income would count if I were to apply for the Work First Program Cash Assistance?

A. Along with meeting the eligibility requirements, a family must also be financially eligible to receive assistance. All income available to the family must be counted with certain exceptions.

Q. Which resources count and which do not for Work First Family Assistance?

A. A family receiving Work First Family Assistance is allowed \$3,000 in resources. Resources that can be readily converted to cash count toward the \$3,000 limit. "Readily converted" means the resource can be converted to cash in five working days. To simplify administration of the program, items that are otherwise countable but it is unlikely they could be converted to cash in five working days are not countable.

Q. What can I use the WFFA check for?

A. The WFFA check can be used for any purpose that will benefit the child/children included in the assistance unit.

Q. Do I have to report changes to my caseworker?

A. All changes must be reported to the caseworker within 10 days of knowing of the change even if the recipient is required to complete a Quarterly Report.

Q. What is the Work First Employment Program?

A. The Work First Employment Program helps families get and keep a job. It requires personal responsibility. It supports the universal belief that work is the foundation of our society and that every job has meaning and purpose.

Q. Who is eligible for the Work First Employment Program?

A. The Work First Employment Program helps families that receive Temporary Assistance to Needy Families (TANF) and are not exempt from the employment requirement. Services to help people stay employed are also provided to working families whose income is below 200% of the poverty level and received TANF during the last six months.

Q. What type of supportive services are available to Work First Employment Program families?

A. Eligible families can receive assistance with training, education, transportation, child-care, or counseling if the service supports a self-sufficiency plan that was developed with the family.

For more information, please see the [Work First Program](#).

For more information, contact:

Soundra McRae, Work First Unit Supervisor

Email: soundra.mcrae@ncmail.net

Or

Paige Rumfelt, Employment Services Social Worker

Email: paige.rumfelt@ncmail.net

CHILD CARE SERVICES

(ASSIGNED TO WORK FIRST UNIT)

Mission:

To ensure safe, quality, accessible and affordable child care for children in Montgomery County, supporting the independence of families by enabling responsible adults to secure and maintain employment and meet the basic needs of their children.

Vision:

All families will have the understanding of quality child care and have resources available to select the most appropriate child care arrangement for their future. Adult members of the family will go to work each day knowing that their children are in a safe, nurturing, quality environment where they can learn and grow.

Objectives:

- Enable parents to maintain full time employment in order to support their family and achieve economic independence;
- Enable parents to participate in job training or educational programs that will lead to their employment;
- Provide child care to children receiving protective services (including children at risk of neglect/abuse);
- Provide child care to children in need of early intervention to enhance their development; and
- Facilitate the reunification of families, aid families in crisis, and prevent foster care.

Definition of Child Care Services

Child Care Services mean the provision of protection, care and developmental experiences to children ages birth through 12 years for a portion of the day but less than 24 hours. In certain circumstances, children through age 17 may receive child care services.

Montgomery County Social Services is the local purchasing agency that contracts with local child care providers. Information is provided to families and the community about what constitutes a good day care experience for a child as well as assists eligible families with the cost of the child day care service.

Who May Receive Child Care Services?

Parents, foster parents, or the adult responsible for the care of the child may apply for child care services. The application is made at the county department of social services. The Montgomery County Social Services offers assistance with child care cost based on:

- Need for child care
- Household size
- Household income

To be eligible for child care services the family must meet at least one of the five program goals listed above. Families must also be income eligible to receive this assistance. The family's gross income cannot exceed the state's maximum income eligibility limit for the number of persons in that income unit. Child care services to support child protective or child welfare services and child care for children in the custody of Social Services are provided without regard to income.

Overview of Subsidized Child Care

Using a variety of state and federal funds, North Carolina provides subsidized child day care services to a large number of eligible families. Child care services are provided in child care arrangements (schools, homes and centers) which have been approved to receive child care subsidies. Parents choose the placement for their child.

Subsidized Child Care Program - Local Payment Policies

In Montgomery County subsidized child care services may be provided to families demonstrating a need for child care, and who have been determined eligible for services.

Reasons care is needed include:

- To support client employment
- To support the delivery of child protective services
- To support education/training services leading to employment
- To support developmental needs of children
- To support the delivery of child welfare services

All financial resources available to a family must be explored and counted in the total budget unit. It is suggested that applicants talk with the Child Support Unit within five (5) days of making an application for child care, if the absent parent(s) is/are not under a current order.

Note: There is countable and non-countable income in determining family income for child day care assistance. Please contact the Montgomery County Child Care Office at (910) 576-6531 for an accurate assessment of family eligibility.

All families who are income eligible for child care services are required to pay a portion of the cost of child care through fees. This is called the Parent Fee. The Parent Fee amount is based on the household size and household income.

Parental Choice

Federal regulations of subsidized child care funds require that parents be allowed to choose a child care arrangement from a variety of types of providers. Parental Choice is an important component of child care services. Parents have the right to select a child care provider for their children. The Montgomery County Social Services makes every effort to place children in the child care arrangements selected by parents. Child Care staff works with the parents to help them make informed choices about child care.

Factors to Consider in Choosing Child Care

- Special needs of the child which would require a specific type of care
- Hours when child care is needed, based on work or school schedule, including travel time
- Type of program the parent desires, such as center-based or home-based care
- Convenience of the child care arrangement to home, work, or school
- Difference between regulated and unregulated child care
- Factors such as group size, staff/child ratio, staff qualifications
- Substantiation of abuse or neglect of child care provider
- Discipline Policy

Questions To Ask Child Care Provider

Basics:

- Is the program licensed/registered?
- Are the hours acceptable & fees affordable?
- Is the facility safe and well maintained?
- Is the atmosphere bright and pleasant?
- Are the toys safe and appropriate?
- Is there good light and ventilation?
- Are the medicines and cleaning products locked away?

Care Givers:

- Do the care givers enjoy children?
- Are the children greeted when they arrive?
- Do they respond quickly to children's needs?
- Do they play with the children?
- Are they gentle in handling children?
- Do they meet with parents on a regular basis?
- Are parents encouraged to get involved?
- Does the care giver take continuing education classes?
- Will the care giver tell you what your child is doing each day?
- Do the care giver's attitudes toward children match your own?
- Is the care giver's style appropriate for your child's age and temperament?
- If there were a disagreement, would you be comfortable discussing it with the care giver?

- *Are caregivers the role model you want for your child?*

Activities:

- Are activities varied and age-appropriate?
- Do the children play outdoors each day? Is the outdoor area safe?
- Can the care givers see the entire outdoor play area at all times?
- Is there a clear schedule for meals, naps, playtimes, story time, and quiet time?
- Are snacks and meals nutritious and well balanced?
- Are there plenty of toys, learning materials and books for the children?
- Are parents welcome to spend time there?
- Would the size of the group allow your child to get the attention he/she needs?
- Are the activities enjoyable?

Environment:

- Are the children happy?
- Is the atmosphere pleasant and bright?
- Is the classroom big enough for the children?
- Can the children reach the toys and learning materials?

Trust your instincts. If you feel you need to visit again, do it! You are the best judge of what your child needs.

Where Can I Direct Complaints Inquiries?

The Child Care unit receives a lot of inquiry calls regarding the history of a child care provider. There is some information within the unit that is accessible to families. Call Montgomery County DSS in Troy at (910) 576-6531 for an initial inquiry. For a complete history, contact the NC Division of Child Development at 1-800-859-0829. Ask for Customer Service. They will need the name of the provider and the location by county. Ask for a compliance and report history. Information can not be given over the phone. The reports and findings will be sent through the mail.

[Star Rated License Information - Overview](http://ncchildcare.dhhs.state.nc.us/parents/pr_sn2_ov_sr.asp)

http://ncchildcare.dhhs.state.nc.us/parents/pr_sn2_ov_sr.asp

For more information, contact:

Soundra McRae, Work First Unit Supervisor

Email: soundra.mcrae@ncmail.net

Or

Alicia Higgins, Child Care Casemanager

Email: alicia.higgins@ncmail.net

FOOD STAMP PROGRAM

The Food Stamp Program is a federal program designed to help low income families supplement their purchasing power for groceries. Non food items and alcohol products can not be purchased with food stamps.

Families must meet the income and resource limits in order to be eligible to receive food stamps. All countable income is based on the gross income an individual receives. Standard work related deductions, shelter cost and, if eligible, medical deductions are some of the deductions that may be subtracted from the gross countable income. Receipts are required for these deductions. Non-relatives who live together in the same home may meet the eligibility requirement to apply separately. Children living in the home with their parents must be age 22 in order to be considered for eligibility as a separate food stamp unit.

An individual's resources are considered in the eligibility process. This may include bank accounts, excess value of vehicles, trust funds, promissory notes (if negotiable), and certificates of deposits. Each reserve item will be evaluated to determine if it is a countable reserve item.

Food stamp allotment is based on the number of individuals being included in the food stamp unit and the countable net monthly income. Certification periods vary based on individual circumstances, but are not to exceed twelve months.

Purpose of the Food Stamp Program

The Food Stamp Program is designed to promote the general welfare and to safeguard the health and well being of the nation's population by raising the levels of nutrition among low-income households. The cost for Food Stamps is funded 100% by the Federal government. Administration costs are shared 50/50 by Montgomery County and the US Department of Agriculture.

Applying for Food Stamps

Anyone may apply for food stamps: eligibility criteria will be discussed during the interview process. Applications for Food Stamps are taken Monday through Friday from 8 a.m. to 5 p.m. at the Department of Social Services, 102 E. Spring Street, Troy, NC 27371. If you are disabled or elderly you may call our office at 910-576-6531 for a telephone interview or appointment.

The information needed to determine eligibility is:

- Identification such as valid driver's license or ID card
- Social Security Cards for all members of household included in Food Stamp Program
- Verification of all income for members of household included in Food Stamp Program
- Verification of Rent or Mortgage Expenses
- Verification of Utility Expenses (electric bill, water bill, telephone bill, etc.)
- Information regarding all resources (bank accounts, 401-K, vehicles, burial plots, etc.)
- Proof of medical expenses for household members receiving Social Security Disability or age 60 and older

Additional information may be needed and will be discussed during the interview.

Determining Eligibility

The three main areas of eligibility are household size, resources and household income. Once the caseworker has determined that the household meets each of these eligibility factors, the shelter and utility expenses will be considered. Other deductions that *may* be allowed are childcare expenses, legally ordered child support payments and medical deductions.

Food Stamps – Emergency Assistance

All applicants are screened for emergency benefits during the interview process. An emergency is determined by assessing the household's situation for the entire month the application was submitted. If the household is determined in need of emergency benefits they will receive their initial benefit amount within 7 days. If a household is determined ineligible for emergency benefits they will receive their benefits within 30 days of the date of application.

How Food Stamp Benefits Are Received

Paper stamps or food coupons are no longer issued in North Carolina. In March 1999, Montgomery County began using Electronic Benefits Transfer (EBT) Cards to issue benefits to eligible households. Once a household has been determined eligible, they will receive an EBT card through the mail, only one card is issued per family. The card then needs to be activated at the Montgomery County Food Stamp department. The household may then purchase food at any authorized grocery store. Once a purchase has been made the amount of the purchase is automatically deducted from their account and the remaining balance is shown on the bottom of their receipt. The monthly benefits are added to the account on the same day each month.

FOOD STAMP PROGRAM - FREQUENTLY ASKED QUESTIONS (FAQ'S)

Q. What are food stamps?

A. Food stamps are benefits placed on a client's EBT card, which is used like money to buy food.

Q. Why do you need food stamps?

A. Food stamps are a way to get through tough times. They help you get back on your feet. Food stamps are a bridge to better times.

Q. What is Emergency Service?

A. Emergency service is a special application processing method designed to provide benefits to a food stamp unit within seven calendar days from the date of application. Non-emergency service food stamp applications are processed within 30 days.

Q. Who can get food stamps?

A. You can get food stamps if:

- You are a U.S. citizen;
- You are a qualified alien who is admitted lawfully into the U.S.;
- You have no or low income;
- You are on public assistance;
- You are retired;
- You are disabled; or
- You are homeless;

AND:

- You are not trying to avoid a felony prosecution;
- You are not fleeing from law enforcement;
- You are not trying to avoid jail after conviction of a felony; and
- You are not in violation of the conditions of probation or parole.

Q. How do you get food stamps?

A. You fill out an application at you local Department of Social Services agency. If you are sick and can't come in, you can call the office and apply over the phone or have an authorized representative come in and apply for you.

Q. What's the application like?

A. It asks:

- Where do you live?
- How much money do you earn?
- How much money do you have in the bank?
- Do you have a car?
- Who lives with you?
- What other money do you get?
- What bills do you have to pay every month?

To fill out your application you will need to have:

- Social Security numbers for everyone in your home who has one
- ID which shows your name and address (driver's license or mail)
- Bills showing how much you pay for rent, mortgage, gas, lights, water, telephone
- Proof of the money you get every month (pay stubs from your job, Social Security, public assistance, child support)
- Proof of the money you have in the bank (bank statement)
- Proof of what you pay someone to keep your children while you work

Your caseworker can help you get this information.

Q. What can you buy with food stamps?

A: You can buy:

- Milk and other dairy products
- Meat, fish, and poultry
- Cereals and ingredients used for baking
- Vegetables and fruit
- Cold deli items, such as sandwiches and salads which are intended to be eaten at home
- Ice and water for human consumption
- Specialty food such as dietetic and diabetic foods, infant formulas and "health food" items
- Garden seeds and plants for growing at home
- Pectin used in canning
- Hot prepared meals served by restaurants and non-profit agencies authorized by USDA to accept food stamps

Q. What will your food stamps not buy?

A. You cannot buy:

- Non-food items
- Alcoholic beverages
- Tobacco and tobacco products such as cigars, cigarettes, snuff, and chewing tobacco
- Drug store medication such as aspirin, antacids, and cough drops
- Food preservation equipment such as canning jars and freezer containers
- Foods not intended to be eaten by people such as dog and cat food, bird seed
- Vitamins and minerals in tablet, capsule, powder, or liquid form
- Food which is to be heated in the store

PROGRAM INTEGRITY (FRAUD INVESTIGATIONS & CLAIMS COLLECTIONS)

The Montgomery County Program Integrity Unit investigates cases of fraud, abuse and waste in public assistance programs. These programs include: Work First, Food Stamps, Child Daycare, Medicaid, Emergency Assistance, Low Income Energy Assistance, Special Assistance and other programs as needed. This service performs investigation of suspected "welfare fraud" and ensures collection of overpayments. It is a specially designed stewardship effort with goals to aggressively prevent, discover, and recover improper overpayments/over-issuance in Economic Service Programs. In addition to collecting monies after an overpayment has occurred, "Front-End" investigations are conducted at random and high-risk cases are monitored in an effort to prevent overpayments.

Anyone may call to report suspected fraud, abuse or waste in public assistance programs. If you choose to give us your name we will not disclose that information to the client. The number you should call for persons receiving benefits in Montgomery County, North Carolina is 910-576-6531.

Basis for investigation:

Most investigative referrals come from people other than MCDSS staff. Sources of a referral include but are not limited to the following:

- an anonymous phone call
- a letter from a concerned citizen
- information from other agencies
- computer data
- staff referrals from within the agency

The investigator must examine all factors, which may substantiate the existence of an erroneous payment. An overpayment occurs if someone receives public assistance and it is later determined the person was not eligible to receive that benefit, either because it was received as a result of fraud or because of a mistake in eligibility determination.

There are 3 types of over-issuance: client error, intentional program violation, or agency error. If the decision is to initiate investigative activity, it will then be determined whether the nature of the investigation is criminal, civil, or administrative.

For more information, contact:

Shelia Talbert, Food Stamp Unit Supervisor

Email: shelia.talbert@ncmail.net

Or

Melissa Griffin, Fraud Investigator

Email: melissa.griffin@ncmail.net

ENERGY ASSISTANCE PROGRAMS

(Assigned to Food Stamp Unit)

The **Crisis Intervention Program (CIP)** and **Project SHARE** energy assistance is provided on a first come, first serve basis. Both programs are based on families having crisis and meeting income guidelines. These programs are only funded during periods of extreme high and low temperatures that

create weather-related emergencies, and are used for primary sources of heating and cooling. Funding is limited.

The **Low Income Energy Assistance Program (LIEAP)** operates from November through February. Everyone who applies and is eligible will receive a check. Checks are usually received during the first two weeks in February.

For more information, contact:

Shelia Talbert, Food Stamp Unit Supervisor

Email: shelia.talbert@ncmail.net

Or

Sherri Hurley, Energy Assistance Casemanager

Email: sherrie.hurley@ncmail.net

CHILD SUPPORT ENFORCEMENT PROGRAM

Child Support Services is a nationwide program established by Congress in 1975 to ensure that both parents support their children to the extent of their ability. In Montgomery County the program is administered by Social Services. The federal legislation mandating the Child Support Program is Title IV-D of the Social Security Act. Sometimes, the program is called the IV-D (4-D) program.

Montgomery County Child Support Enforcement is located at the DSS Office in Troy, North Carolina 27371. (This is behind Montgomery County Courthouse.) The mailing address is Drawer N, Troy, North Carolina 27371. The phone number is (910) 576-6531.

Services can be provided to any North Carolina parent or custodian regardless of income level. Individuals receiving Work First Family Assistance and Medicaid are automatically referred to the local child support enforcement agency. Persons receiving public assistance are required to cooperate with child support enforcement as a condition of their eligibility for assistance. Persons not receiving public assistance may apply for and receive child support services upon the payment of a \$10.00 or \$25.00 application fee, based on income guidelines from the Federal Register. This includes aunts, uncles, grandparents, court-appointed guardians, or others who are caring for a child.

Basic Services are provided:

- Location of Absent Parent
- Establishment of Paternity
- Establishment of Legal Child Support Order
- Collection of Child Support Payments

Location of Absent Parent:

The Montgomery County DSS Child Support Enforcement Unit can help locate the non-custodial parent who is absent from the home and has a financial obligation to support children. Child support staff uses local, state, and federal sources to find a non-custodial parent such as NC Department of Driver's Licenses, NC Department of Motor Vehicles, NC Employment Security Commission, NC Department of Corrections, NC Vital Statistics, Federal Inmate Locator, NC Employment Security Commission, and the Wildlife Commission.

Paternity:

Paternity means fatherhood. Establishing paternity means a person named as the father of a child has been legally determined to be the father. Establishment of paternity is necessary only when the mother is not married to the father of the child. Paternity must be determined legally before a child support order can be established. This activity is important since both parents have a right and a need to know that they have contributed to the future development of their child.

Identity: We all have a basic need to know who we are and who our family members are. By knowing both parents we have a better understanding of our own identity and past. Establishing paternity will help to strengthen a child's emotional growth by providing an added sense of security as well as aiding in the child's social and psychological development.

Medical: Your child needs to be aware of his parents' medical history. This is important as your child may have inherited diseases or disorders which may not be detected at birth or in childhood.

Benefits: Your child has the right to benefits from both parents. These may include Social Security, insurance benefits inheritance rights, Veteran's and other types of benefits. Your child may not receive these from his father unless paternity has been legally acknowledged or established.

Money: The law requires that both parents provide for the financial needs of their child. By receiving assistance from both parents a child's chances for success are greatly improved.

Fathers as well as mothers have the right to know their child and a responsibility to support them.

CHILD SUPPORT - FREQUENTLY ASKED QUESTIONS (FAQ'S)

Q. How is paternity established?

A. There are several ways that paternity may be established. A brief explanation of each of them is listed below. If you have questions about any method, or need help to determine which may best meet your needs, you may contact the Child Support office or legal counsel.

Hospital-Based Paternity: North Carolina provides the opportunity for a father to acknowledge paternity at the time of a child's birth. This is a simple procedure whereby parents sign the Affidavit of Parentage form in the hospital. This allows the father's name to be placed on the birth certificate, and also serves as a legal acknowledgment of paternity. Paternity may be established by signing this affidavit if:

- the mother was unmarried when she became pregnant or when the child was born, and
- the father is willing to sign an affidavit stating that he is the father of the child.

This Affidavit of Parentage is filed with the State Registrar (Vital Records) and legally declares the paternity of your child.

Voluntary Acknowledgment of Paternity: If you did not establish paternity at the time of birth, you may choose to do so at a later date. The mother and father sign documents acknowledging they are the parents of a child. These signed statements are presented to the court and an Order of Paternity is entered. This legally establishes paternity for a child.

Genetic Testing: If there are any doubts regarding the paternity of a child, you should not sign any paternity declaration documents. Genetic tests can be performed to determine the paternity of a child. These tests will show that a man is not the father of a child or indicates the probability that he is the child's father. The test results provide reliable information to aid parents and judges in parentage determinations.

Court-Ordered Paternity Establishment: If the parents do not agree to voluntarily establish paternity, legal action may be filed with the court to establish paternity for a child. After all evidence is presented, a judge will decide if paternity should be ordered.

Q. Do we need to establish paternity now?

A. Yes. Although the relationship between the mother and father may be good now, things may change in the future. You should also consider the possibility that something could happen to the father. It's always best to resolve the paternity issue as soon as possible to protect your child's future.

Q. How are legal child support obligations established?

A. Legal child support obligations are established by the court and are based on the needs of the child and parents' ability to provide support. Mandatory guidelines are used in the North Carolina Child Support Enforcement Program in order to compute a child support obligation based on the combined gross income of the custodial and non-custodial parent. The absent parent(s) may either voluntarily agree to an amount of support, or the obligation can be established through court proceedings.

Q. How are child support obligations collected?

A. The Child Support Enforcement Agency will decide on the best way to collect the child support ordered to be paid by the absent parent. All new or modified child support orders must contain a provision for income withholding to take effect immediately. If this is not possible, the local child support enforcement agency is responsible for any follow-up action that may include court proceedings and the interception of the absent parent's state and/or federal income tax refunds.

Q. How are child support obligations enforced?

A. When a parent refuses to pay court-ordered child support or does not pay the full amount, the child support enforcement agency may do one or more of the following:

- **Request immediate wage withholding**
- **Refer the case for intercept of federal and state income tax refunds**
- **File a lien on real or personal property**
- **Refer the past-due support debt to credit reporting agencies**
- **Request the suspension or revocation of a professional license or a driver's licenses**
- **File a contempt of court action**

Federal law requires state child support enforcement agencies to initiate income withholding, in order to ensure that parents obligated to pay support meet this obligation. Previous legislation allowed income withholding only at the time payments became delinquent in an amount equal to one month's support or at the request of the obligated parent. In 1989 the North Carolina Legislature revised the income withholding law to allow for immediate income withholding in orders for child support entered or modified on or beginning October 1, 1989. In the event income withholding cannot be established immediately, the obligated parent would be subject to income withholding under any of the following circumstances:

- **Being delinquent by as much as one month's support**
- **Upon request of the obligated parent**
- **Upon request of the custodial parent or guardian of the child**

Q. What is the maximum amount that can be withheld each pay period from the obligated parent's wages?

A. Under no circumstances can the percentage of disposable income withheld for child support exceed the following:

- 40 percent of disposable income when only one support order exists.
- 45 percent of disposable income when multiple support orders exist and the obligated parent is supporting a spouse or other children.
- 50 percent of disposable income when multiple support orders exist and the obligated parent is not supporting a spouse or other children.

Q. What is meant by disposable income?

A. Disposable income is that amount which remains after deductions for federal, state and local taxes, Social Security and involuntary retirement contributions.

Q. What if the obligated parent asks the employer to change the amount of withholding?

A. Often support obligations are modified by the courts, arrearage amounts are reduced or other circumstances in a particular case may change so that revisions in the amount of withholding could occur. However, neither the obligated parent nor the employer may make changes in the withholding amount. If changes become necessary, you will be notified by the agency that sent the notice to the employer. If an obligated parent has questions, they should contact their child support enforcement agency.

Q. What happens if the obligated parent terminates employment?

A. The employer must notify in writing the child support agency that sent the income withholding notice, the date of termination, last known address of the obligated parent, and the name of his new employer, if known.

Q. What if I have more questions regarding the child support income withholding law in North Carolina?

A. You should contact the closest child support enforcement agency or call the [State of North Carolina Child Support Enforcement Office](#) at 1-800-662-7030.

Q. What about visitation and custody issues?

A. Issues concerning custody and visitation are a separate issue and not a part of the child support process.

Out of State Parents

If the parent lives in another state, a court action will be initiated in Montgomery County and forwarded through the other state's central registry to the child support authority in the jurisdiction where the absent parent resides. That office will then bring the absent parent before the local court to request that a child support order be entered. The court in the other state has the authority to set the amount of the order.

Federal law requires all states to provide location, establishment and enforcement services. North Carolina has adopted the Uniform Interstate Family Support Act (UIFSA) repealing the Uniform Reciprocal Enforcement of Support Act (URES). UIFSA unlike URESA creates a structure designed to provide for only one support order at a time called the controlling order. In cases where multiple orders exist, UIFSA provides rules to determine the controlling order. Underlying this structure is the principle of Continuing Exclusive Jurisdiction, or CEJ.

Under UIFSA, as state issuing a support order has CEJ as long as it remains the resident State of the obligor, the individual obligee, or the child for whose benefit the support order is issued. CEJ plays a prominent role in the area of order modification.

UIFSA provides for enforcement mechanisms such as direct income withholding if sent to an employer in an UIFSA State, administrative enforcement without registration of the other state's order, and registration for enforcement only.

Child Support – Glossary of Terms

ABSENT PARENT (AP): See Non-custodial parent. Absent Parent or AP is another name for non-custodial parent.

ALLEGED FATHER: A man whose legal relationship to a child has not yet been legally established.

ARREARAGE: The total unpaid child support obligation owed by a parent who is obligated by an administrative or district court to pay support.

CHILD SUPPORT GUIDELINES: A standard method for setting child support obligations based on the income of the parent(s) and other factors as determined by State law.

SHOW CAUSE CONTEMPT: A district court proceeding to enforce the court's orders. A contempt action may be filed, for example, if a parent has willfully failed to pay child support. If found guilty, the court can impose a fine or incarceration or both. The court must set a purge fee if incarceration is imposed.

CUSTODIAL PARENT: Within the child support program the parent or custodial person who has legal or physical custody of a child and the right to receive child support on behalf of the child.

DEFAULT: Failure of a person, usually the defendant to file an answer, response, or appeal in a civil case within a certain number of days after having been served with a summons and petition.

DEFAULT JUDGMENT: Decision made by the court when the defendant fails to respond. Normally, the party asking for relief from the court will be granted everything requested in the petition or motion when the other party is in default.

DEFENDANT: The party in a court action who is being sued.

FRAUD: False statements including statements made to state officials with the intent of wrongfully receiving public assistance. Within the child support program, fraud most commonly refers to the custodian receiving child support payments and not reporting them while receiving WFFA.

IMMEDIATE INCOME WITHHOLDING: A way to collect support through mandatory payroll deduction. Income withholding can be ordered at the time a support order is established or enforced. An income withholding does not necessarily mean that the employee is behind in his/her support payments.

LIEN: A cause filed in court to attach a portion or all of an obligor's real or personal property. Generally, liens are placed on property owned by a judgment debtor or through workers' compensation court against any settlements that might be reached

LOCATE: Process of obtaining a verified address or employer for a non-custodial parent in order to begin child support establishment or enforcement.

NON-CUSTODIAL PARENT (NCP): Any individual who is absent from the home and is legally responsible for providing financial support for one or more children. The non-custodial parent is also

referred to as the absent parent, obligor, or responsible parent.

OBLIGATION: Amount of money to be paid as support by the responsible parent according to law.

PATERNITY: Fatherhood; male parentage.

PATERNITY ORDER: An order entered in an action brought to establish the paternity of a child born out of wedlock.

PETITION: A written request that is filed in district court to initiate a legal action.

PURGE FEE: The purge fee is what a person must pay or do to get out or stay out of jail. The purge fee is set when the person is found guilty of contempt of court.

SUBPOENA: A process commanding a witness to appear in district court, give testimony and bring specific documents, if requested.

SUMMONS: A legal notice to a person of a suit pending in court which requires an answer or appearance.

SUPPORT ORDER: A legal document that establishes a child support obligation by a court order.

Child Support Related Links

- [State of North Carolina Child Support Enforcement Office](#)
- [Federal Child Support Agency](#)

For more information, contact:

Teresa Greene, Child Support Unit Supervisor

Email: teresa.greene@ncmail.net

HUMAN SERVICES DIVISION

CHILDREN & FAMILY SERVICES PROGRAM

CHILD PROTECTIVE SERVICES - INVESTIGATIONS

N.C. law requires that local county departments of social services ensure children's safety in their homes. A child protective services investigative assessment determines whether abuse or neglect has occurred and whether other services may be needed to help the family.

Q. How did my family get reported?

A. Any person in North Carolina who suspects that a child is abused, neglected or dependent can report this to the county DSS. By law, the identity of the reporter is confidential.

Q. Why does DSS want to talk with me and my family?

A. DSS is required by law to conduct an investigative assessment when there is an allegation that a child is abused, neglected or dependent. This means that a Social Worker needs to meet with you and your family to determine if the allegations are true and if your child is safe.

Q. What happens after a report is made?

A. An investigative assessment must be prompt and thorough to determine if protective services should be provided or the complaint filed as a petition in Juvenile Court. If the allegations include abuse, severe neglect, or violations of law, written notification must be made to the District Attorney and law enforcement to coordinate the investigative process.

Montgomery County DSS' goal is to partner with the family and complete investigations as quickly as possible without Court intervention unless your child cannot be protected. It is important to us that all different types of families are respected and that there is a broad range of lifestyles and parenting practices that provide safety and minimally sufficient care for children in our community.

Q. What is involved with an investigation?

A. The investigation and evaluation shall include a visit to the place where the juvenile resides. An investigation means that a Social Worker looks at the environmental, medical, physical, mental health, educational and emotional needs that keep children safe. Other people with helpful information may be contacted for their input. Family input, resources and safety planning are very important in keeping children safe. Your cooperation and consent for the Social Worker to come into your home for the investigation helps this process. It is our goal to keep children safe and families together whenever possible.

Q. Can I refuse to let the social worker into my home?

A. You must give permission for a Social Worker to enter your home. Social Workers will show their identification and clearly explain why they wish to speak with you. They will tell you about the allegations and the process of an investigation.

For safety reasons, law enforcement officers occasionally escort Social Workers after hours and on weekends. Should you choose not to cooperate with an investigation, DSS may file an obstruction petition so that we may complete the investigation as required by law. If an obstruction petition is filed, a Court hearing will be scheduled no less than five days after the parent or caretaker is served with the petition and summons.

Our goal is to respect your rights and work with you to make sure your child is safe. DSS must comply with the law to ensure that children in our community are safe and provided with minimally sufficient care. We will work with you to assess family strengths, needs and supportive resources that are part of safety planning.

Q. What is the purpose of the Safety Assessment?

A. The Safety Assessment is completed when the social worker first makes contact with the family or whenever there is a change in the family situation. This form outlines safety issues and a plan to keep children safe during the investigation. Often there are no safety factors that make it necessary to develop a safety response. If needed, the Social Worker will discuss with you any safety factors present and ask for your input in making a plan that is specific and detailed.

There may be family members or other supportive people who can help be part of safety planning for your child. You have the opportunity to include your comments and your participation is important in developing this plan.

We believe that most families are capable of finding solutions that can preserve their family while making child safety a priority. It is our job to work with families and their supports to achieve these solutions.

Q. What does it mean to place my children with a relative or other caregiver?

A. When the risk to your child is high and other means to protect are not reasonable, DSS will attempt to work with parents and may ask you to place your child with a family relative to avoid custody. For this reason, DSS always asks about relatives or friends who could provide care for your child. State policy requires that a kinship assessment be completed in these cases, as well as a criminal background and child abuse/neglect check.

These placements can help avoid custody and give the parents an opportunity to address any safety issues needed to return the child home. These placements are intended to be short-term and can occur during the investigative process or while DSS is providing services after an investigation.

Q. What happens after the investigation?

A. If abuse, neglect or dependency allegations are found to be true, then the agency provides services to the family with child safety as the goal. You will be notified in writing of the case decision once the investigation is completed. This should occur within 30 days unless the social worker is unable to gather the needed information in that time frame.

A case decision of substantiation or in need of services means that there are safety and risk factors that could result in children being removed from the home without services to protect the child. There are some cases where risk to children is high and no safety planning or services can reasonably protect them. In these cases, DSS can file a petition with Juvenile Court alleging abuse, neglect or dependency or ask the Court to protect the child by removal from the home.

Bringing a child into foster care is used only as a last resort to protect children from serious harm. Reasonable efforts to keep children safely at home are first attempted, along with relative or kin placement if needed. We believe that children have the right to safety, basic care and to remain with their families whenever possible. Statewide less than 8% of all children who have been substantiated as abused, neglected or dependent are removed from the home.

Hours of Operation:

Monday through Friday
8:00 a.m. - 5:00 p.m.

Contact Information:

(To make a Child Protective Services Report)

Child Protective Services Intake

(910) 576-6531 during business hours
911 Evenings, Weekends or Holidays

Why, When, Where and How should child maltreatment be reported?

Reporting suspected child abuse or neglect is the first step in protecting children from future harm. By reporting, the caller is helping the family get services and help that is needed. Abused children may carry the trauma associated with the abuse throughout their lives unless treatment, assistance, and support are provided. Because child abuse rarely stops without intervention, it is important that every citizen report suspected cases.

As stated, North Carolina law establishes protective services for children from birth to age eighteen who are suspected to be maltreated by a parent or caretaker. The law requires that any person who suspects a minor child is abused or neglected shall report the case to the local department of social services in the county where the child resides or is found. Reports may be made orally, in writing, or in person. The person who makes the report is immune from criminal or legal liability if the report is made in good faith. The person reporting is encouraged to provide his/her name, address and phone number, which is treated as confidential information, but anonymous calls are accepted. Providing contact information enables DSS to inform the reporter about the status of the report.

The Montgomery County Child Protection Unit can be reached by phone at (910) 576-6531 during regular business hours or 911 twenty-four (24) hours a day, seven days a week. A reporter does not have to prove that abuse/neglect has taken place, but needs to have reasonable grounds for suspicion. The reporter does not need permission from caregivers to make a report, nor do they have to be informed that a report is made. A social worker will listen to the concerns and document all information given.

Information needed to make a report:

- Name, address and age of the child(ren)
- Name and address of the child's parent, guardian, or caretaker
- The child's condition, including the history, nature, and extent of the injury or maltreatment
- Information known about the family's lifestyle which could affect the safety of the child, and perhaps compromise a social worker's safety

What are signs of Child Abuse and Neglect?

Physical and Behavioral Indicators of Physical Abuse:

- Unexplained bruises in various stages of healing
- Bruises in areas not normally subjected to bruising, such as on the face, non-bony areas of the arms, legs, and/or torso
- Welts, human bites, bald spots
- Unexplained burns, especially cigarette burns or scald burns
- Unexplained fractures, injuries or abrasions
- Child is nervous, hyperactive, aggressive, and exhibits disruptive and destructive behaviors
- Child is unusually wary of physical contact
- Child is unduly frightened of parent or caretaker
- Child expresses little or no emotion when hurt
- Child is unusually shy, withdrawn, or passive
- Child's clothing consistently inappropriate for weather

Physical and Behavioral Indicators of Sexual Abuse:

- Irritation around the genitals or rectum, or an abnormal discharge
- Unexplained, recurring urinary tract infections or yeast infections
- Increased, obsessive masturbation
- Enuresis and encopresis (wetting and soiling)
- Play activities which have sexual activity that is not appropriate for the child's age
- Engages in on-going sexual activity that is not appropriate for the child's age
- Child has detailed and sophisticated understanding of sexual behaviors
- Presence of venereal disease
- Child exhibits delinquent or aggressive behavior or excessive temper tantrums
- Child shows signs of depression
- Compulsive stealing, lying, and destructive behaviors
- Child displays self-injurious behaviors like substance abuse, self mutilation, attempts suicide, prostitution and running away

Physical and Behavioral Indicators of Child Neglect:

- Abandonment by parent or caregiver
- Unattended medical needs
- Consistent lack of or inadequate supervision
- Consistent hunger, inappropriate dress, poor hygiene
- Exposure to injurious environment such as domestic violence, alcohol or drug abuse, mental illness
- Child has poor social skills
- Child appears pale, listless
- Child begs or steals food
- Frequent school absences
- Child regularly displays fatigue
- Child exhibits self destructive behavior
- Child has injuries or fears stemming from home environment
- Child frequently displays extreme attention-seeking behavior

Q. What Happens after a Child Protective Services Report is made?

A. Screening of the report:

A social worker and supervisor must determine if the allegations contained in the report meet the legal definition of abuse, neglect, or dependency. The Department has jurisdiction only when the maltreatment falls within legal definitions AND was committed or allowed by the parent or caretaker. If the allegations and alleged perpetrator meet these criteria, an investigation is initiated. If a report is not accepted for investigation, the reporter has a right to challenge the Department's decision not to investigate through an agency review process.

Investigation of the report:

A social worker initiates an investigation within 24 hours when abuse is alleged. Investigations involving allegations of neglect posing no imminent risk to the child will be initiated within 72 hours.

In conducting the investigation, the social worker will complete numerous investigative tasks. Tasks include, but are not limited to, the following:

- All children within the household will be seen within 24 or 72 hours depending upon the type of maltreatment alleged and described above
- Parents / caretakers will be seen on the same day as the children
- The alleged perpetrator will be interviewed
- All other persons who reside in the household will be interviewed
- A home visit will take place to determine if the environment poses any safety threat to the child
- Develop a Protection Plan, in writing, with the family to assure immediate protection
- Collateral contacts will be made with any and all persons who may have information about the family (ex. physicians, social workers, psychologist, teachers, guidance counselors, law enforcement personnel, neighbors, extended family members, etc)
- Contact law enforcement to initiate a criminal investigation in cases where severe physical abuse or sexual abuse has occurred.
- Complete a Risk Assessment to assess the likelihood of future risk of maltreatment
- Assess family dynamics and patterns of interaction
- Determine the need for on-going intervention services aimed at maintaining a safe permanent home, OR, make temporary alternate plans for the child's care with a relative or other substitute care such as a foster home when no appropriate relative can be located.
- Notify the reporter of agency finding, whether the agency is filing a petition for court intervention, and procedure for a review by the District Attorney
- Document all activities and contacts made during the investigation

The target date for completion of an investigation is 30 days from the receipt of the report.

Contributory Factors to Neglect and Abuse:

While maltreating parents/caretakers share many characteristics with members of the general population, there are patterns of behaviors and family dynamics which are predictors and indicators of child abuse and neglect. The following is a list of characteristics, which are commonly present in maltreating families:

- Tend to be socially isolated and have no social support system
- Parents have low self-esteem
- Parents have distorted ideas regarding the child
- Have little knowledge about child development
- Have unrealistic expectations of the child
- Lack means of controlling child's behavior through alternative methods to corporal discipline
- Inability to empathize (view the world from the point of the child)
- Have difficulty in building trusting relationships
- Mental Health Issues
- Tend to be immature and dependent
- Use of alcohol and/or substances
- Domestic violence
- Inadequate family income and/or sporadic employment history
- Inadequate housing
- Unstable living conditions (transient or frequent moves)
- Limited intellectual functioning
- Family history of child neglect or abuse
- Poor household management

- Poor understanding of role of parent
- Poor communication within the family
- Non-responsive to emotional needs of the child
- Child who is developmentally delayed and/or has behavior problems

For more information, contact:

Alice Lammonds, CPS Investigations Unit Supervisor
Email: alice.lammonds@ncmail.net

CHILD PROTECTIVE SERVICES - FAMILY CASEMANAGEMENT SERVICES

Family Casemanagement Services are legally mandated and provided to families who have had a substantiation of abuse, neglect or dependency or a finding of in need of services due to safety issues. The goals of these services are to maintain the safety of children; to strengthen the family's capacity to protect and nurture its children; and to maintain children in their own families.

Q. What Does Family Casemanagement Services Mean?

A. N. C. law requires that counties provide services to ensure a child's safety and that his/her basic needs are being met by his/her parent, guardian, or caretaker. If an investigative assessment social worker informs you that your case will be substantiated and transferred to a Family Casemanagement Services Social Worker, this means that another Social Worker will be contacting you to assist with providing appropriate services to you and your family. This is an effort to preserve your family as well as to strengthen your family as a unit.

Q. What Can I Expect?

A. Within 7 calendar days of the substantiation, a Family Casemanagement Services Social Worker will be contacting you to introduce him/herself. This social worker will have at least monthly face-to-face contact with you and your family as well as contact with others involved, i.e., therapists, doctors, other family members, on a bi-weekly basis to assure progress toward the treatment goals is continuing. Always, the focus of an Family Casemanagement Services worker's effort is to ensure protection of the involved children and the preservation of the family.

Shortly thereafter, the Family Casemanagement Services Social Worker will discuss what is called a family services case plan. This is a document, which will be jointly developed between your family and your Family Casemanagement Social Worker. This plan will specifically address the behaviors which were identified as posing risk to your children and how you and the Social Worker agree to address the issues.

Remember, if you have previously signed a protection plan with the Child Protective Services Investigative Social Worker, it remains in effect until further notice. The family services case plan will reflect a time for review and will also spell out specifics which may occur should you fail to comply, protect, and provide for your children. This document requires both the Family Casemanagement Services Social Worker and the parent(s), guardian(s), or caregiver(s), signatures and you will be provided with a copy. Any changes or updates can occur at anytime deemed appropriate.

Dependent upon your situation, a child and family team may be established. This is a team comprised of professionals, parents, and the family social worker involved with your family. You should always be an active participant on these teams.

Q. What Are The Possible Outcomes?

A. If you actively participate and change the behaviors, which posed risk to your child(ren), the Family Casemanagement Services worker will close your case. However, if the risk factors are not reduced or should you refuse to cooperate, the Social Worker will present the situation to the Unit Social Work Supervisor and a decision will be made as in the best interests of your child(ren).

This may mean to ensure the child(ren)'s safety, the Department will pursue Court action. In a very small number of cases, the child(ren) may be placed out of the home, either voluntarily or by the Department's petitioning the Court. We want children to remain with their families and that will be the focus of our work together.

Q. Anything Else?

A. You and your family have the right to be treated with respect and courtesy, also to have your questions answered and your telephone messages returned in a timely manner.

If you have an emergency, you may contact the Family Casemanagement Services Social Worker between the hours of 8:00 - 5:00 at 910-576-6531.

If you feel the situation will not wait until the Social Worker returns your call, you may contact the Unit Supervisor for assistance.

Q. What Can I Do To Help The Process?

A. Cooperate with the following:

- Allow the In Home Services social worker to come to your home.
- Keep all scheduled appointments.
- Discuss any concerns you may have reasonably and calmly.
- Work with the Family Casemanagement Services worker to develop the plan for your family.

Understand that the Family Casemanagement Services Social Worker will be working with you to preserve your family and strengthen it as a unit.

Children & Family Services - Related Sites

North Carolina Department of Health and Human Services

<http://www.dhhs.state.nc.us/dss>

National Child Welfare Resource Center on Legal and Judicial Issues

www.abanet.org/child/rcjji/home.html

National Association of Social Workers

<http://www.naswdc.org>

Smart Start

<http://www.smartstart-nc.org>

National Resource for Foster Care and Permanency Planning

<http://guthrie.hunter.cuny.edu/socwork/nrcfcpp>

National Clearinghouse on Child Abuse and Neglect Information

<http://www.calib.com/nccanch>

National Adoption Information Clearinghouse

<http://www.calib.com/naic>

Prevent Child Abuse North Carolina

<http://www.childabusenc.org>

For more information, contact:

Pat Barringer, Foster Care & Adoptions Unit Supervisor

Email: pat.barringer@ncmail.net

Or

Alice Lammonds, CPS Investigations Unit Supervisor

Email: alice.lammonds@ncmail.net

CHILDREN & FAMILY SERVICES: FOSTER HOME LICENSING & PLACEMENT

Montgomery County DSS partners with the community to recruit, train, license, support and monitor foster and adoptive homes for children in foster care.

Foster and adoptive families are diverse in race, ethnicity, income and age. There are both single and married foster parents. We encourage interested persons to contact us to learn about the required 30 hour training "Model Approach to Partnership in Parenting" (MAPP) offered several times per year.

There are children in need of committed, flexible, open, loving and capable families for short term placements as well as those families interested in fostering to adopt children. The mutual assessment and selection process helps families determine if fostering is a good match for them.

Foster Home Licensing & Placement Services Include:

- Training
- Assessment
- Licensure
- Foster care board payment after licensure
- Ongoing support and training

Children & Family Services: Family Permanency Casemanagement

Foster Care is temporary substitute care for children who cannot remain safely in their home as determined by the Court. Child placement services shall be provided to any child in the custody or placement responsibility of a County Department of Social Services. Placement of a child in foster care requires assessment of the child and family's needs and careful planning.

The placement process focuses on the whole family rather than only on the child in placement. The child, the family and the foster care providers shall be appropriately prepared for the placement prior to the physical move of the child, except in emergency removals.

Child placement needs are evaluated, arranged, maintained and supervised in licensed or Court-sanctioned placement, with services to assist in reunification or another permanent plan for the child. The agency provides services in conjunction with the community and are community-based, culturally competent, child centered, and family focused.

Families for Kids goals:

- Community-Based Family Support
- One Coordinated Assessment
- One Social Work Team
- Single Stable Placement
- One Year To A Permanent Home

Family Permanency & Child Placement Services Include:

- Services to protect children in their own homes, strengthen families, and prevent out-of-home placement
- Careful planning and decision making with the family about placement, when necessary
- Assessing children's needs to ensure appropriate placement and services
- Arranging and monitoring a placement appropriate to the child's needs
- Involving the kinship network to provide planning, placement and other support for the child and family
- Developing and arranging community-based services to support the child and family
- Collaborating with other community service providers working with the family to ensure continuity of services and to prevent duplication of services
- Referring the child and family to needed services, including clinical treatment
- Providing treatment services, as appropriate
- Preparing the child, the child's family, and the foster family for separation and placement, including negotiating and preparing visitation agreements
- Assessing family strengths and needs to determine the appropriate plan for service
- Providing ongoing risk assessment to determine risk to the child and to guide the case planning process
- Working with the family to develop and implement the Family Services Case Plan
- Monitoring and updating the Family Services Case Plan with the family
- Providing case management
- Concurrent permanency planning with the family to develop alternative options to provide a permanent home for a child should reunification fail
- Helping the family meet Family Services Case Plan objectives by providing information, instruction, guidance and mentoring on parenting skills
- Providing counseling to the child and family to help the child and family cope with the grief resulting from the separation and placement
- Arranging medical examinations and other services for the child

- Supervising foster care facility to ensure that the child receives proper care during placement
- Maintaining contact with the family and others significant to the case
- Preparing for and participating in court proceedings
- Maintaining a close working relationship with the agency attorney for guidance in the legal process
- Periodically reviewing the Family Services Case Plan
- Preparing for and facilitating Permanency Planning Action Team meetings
- Providing transportation for children in foster care when needed and not otherwise available, including visits with parents, siblings, and relatives
- Providing independent living services to assist older youth in learning life skills necessary to make a successful transition from foster care to living on their own
- Ensuring that foster care placements across state lines are in compliance with the Interstate Compact on the Placement of Children
- Recruiting, developing and supervising foster care families and child care facilities
- Recruiting and assessing relatives and other kin as potential caregivers
- Assessing and periodically reassessing foster care homes and facilities to determine if the home or facility meets the needs of the children it serves
- Providing consultation, technical assistance, and training to assist foster families and foster care facilities to expand and improve the quality of care provided
- Involving foster parents in the planning and decision making for children in foster care
- Facilitating foster/adoption options for children and preparing foster/adoptive parents
- Preparing children for adoptive placements and maintaining life books
- Maintaining the foster care case record and thorough documentation of case activities

CHILDREN & FAMILY SERVICES: ADOPTIONS

These services assist children who cannot safely return to their birth families become part of a legally secure permanent home.

Adoption Program Philosophy

Adoption is the method provided by law to establish the legal relationship of parent and child between persons who are not so related by birth, with the same mutual rights and obligations that exist between children and their birth parent. The primary purpose of adoption is to help children whose parents are incapable of assuming or continuing parental responsibilities to become part of a new family.

In order to render the best possible services, each Montgomery County DSS staff member must have the conviction that an appropriate home can be found for any child who needs to be adopted and that the agency is responsible for enabling this. To accomplish this goal, Montgomery County DSS is committed to the diligent recruitment of potential adoptive families that reflect the ethnic and racial diversity of children in the state for whom adoptive homes are needed. Our responsibility is to provide prospective adoptive parents equitable access to the preparation and assessment process.

The selection of a family focuses on the needs of the child being placed. The placement services include assistance to the child and the adoptive family in the process of their integration as a new family.

Goals of Adoption Services are to:

- Ensure timely permanence for children through legal adoption;
- Ensure that each child, regardless of race, age, ethnicity or handicapping condition, has an opportunity for placement in a permanent family;
- Support and strengthen the adoptive family;
- Provide services to all members of the adoption triad.

Adoptions Services Include:

- Recruitment, Training and Assessment of Families
- Child Specific Adoption Recruitment and Preparation
- Adoption Placement and Support
- Post Adopt Services

For more information, contact:

Pat Barringer, Foster Care & Adoptions Unit Supervisor
Email: pat.barringer@ncmail.net

ADULT SERVICES PROGRAM

The Montgomery County Adult Services Unit mission is to provide protective and supportive social work services, which enhance the independence, dignity and right to self-determination of elderly and disabled adults. To accomplish this mission Adult Services has experienced Social Workers working with clients who require one of the services provided by the Adult Service Unit.

Those services include:

- Adult Care Home Case Management
- Adult Care Home Licensing and Monitoring
- Adult Protective Services
- Community Alternative Program (CAP)
- Placement
- Intake
- Guardianship Case Management
- Representative Payee
- In Home Services
- Adult Day Care (Not Currently Available)

The Intake Social Worker is available during hours of operation, Monday through Friday 8:00am to 5:00pm to speak with any individual who either comes into the unit with questions or calls on the phone. The Adult Service Unit Social Workers are very knowledgeable about not only services provided directly by the Adult Service Unit but those of other community agencies.

The Adult Service Unit makes numerous referrals to other agencies as we work cooperatively to provide services to meet the needs of Montgomery County residents.

To learn more about the services offered by Adult Services, please review the following information or call Montgomery County DSS at (910) 576-6531 and ask to speak with an Adult Services Intake Social Worker

We also have an On-call Protective Services Social Worker who can be contacted in the event of a major emergency through the Montgomery County 911 after 5:00pm Weekdays, and throughout Weekends and Holidays.

Adult Social Services: Adult Care Homes (ACH) Licensing & Monitoring

Adult Care Homes (ACH), commonly referred to as Rest Homes, Family Care Homes, or Assisted Living, are homes which provide residential care for aged and disabled adults. These homes provide around-the-clock or live-in staff who prepare meals, supervise medications, provide assistance with bathing, grooming and other personal care needs.

Adult Care Homes not only provide care for the elderly, but also for those with mental illnesses, developmental disabilities, and substance abuse problems. Family Care Homes provide care for up to six people in a family-like setting. These homes are usually found in residential areas. Homes for the Aged are larger facilities, serving seven or more people. Also, there are Developmentally Disabled Adult Homes which serve developmentally disabled individuals who participate in approved day programs. All three types of homes provide assistance with meeting the residents' daily needs, and have staff on duty 24 hours a day.

Nurses are not required in Adult Care Homes, although some do have nurses and certified nursing assistants on staff. Aides provide assistance with the activities of daily living such as bathing, dressing, grooming, and feeding. Adult Care Homes are different from nursing homes in the level of care they provide and the qualifications of staff.

NC Department of Facility Services is responsible for licensing these Adult Care Homes. Montgomery County Department of Social Services is responsible for providing an Adult Home Specialist to monitor the facilities provision of services to the residents as set forth by the States standards.

Adult Home Specialist:

The Adult Service Unit assigns a Social Worker who serves as an adult home specialist (AHS). The purpose of this position is to monitor, investigate complaints, and provide assistance to facilities who work

with a very challenging and diverse population. If there are any problems identified during the routine monitoring of the facility, the AHS is responsible to assure that a corrective plan is completed and signed by facility administrator and the problem is corrected.

Adult Care Home Licensing and Monitoring Services Include:

- Assist the State with Initial Licensure Process
- Investigations on "Unlicensed Facilities"
- Technical Assistance
- Routine Monitoring
- Complaint Investigation
- Negative Actions

Annually, the AHS is responsible for completing a comprehensive evaluation of all licensure areas, and developing a Annual Monitoring Plan to prioritize and target each area for review. The areas include:

- Medication
- Activities
- Resident Funds
- Food Service
- Admission and Discharge
- Physical Environment
- Management and Personnel
- Health Care
- Resident Rights

Adult Social Services: Enhanced Care/Case Management

Enhanced Care is one of the four fixed daily rates paid to a Medicaid enrolled care home for the provision of personal care assistance to heavy care residents.

A heavy care resident is one who needs extensive assistance or is totally dependent on staff for eating, toileting, and/or ambulation.

Who is Eligible?

A Special Assistance Medicaid eligible resident of an Adult Care Home.

How and Who Makes a Referral for this Service?

An Adult Care Home makes the referral to the Department of Social Services Adult Care Home Case Manager/Social Worker. It can be made by phone or letter. Upon receiving the referral a Social Worker/Case Manager will assess and determine eligibility of the Adult Care Home resident.

Case Management Services include:

- Assessment of Need
- Monthly and Quarterly contacts to assure needs are met
- Yearly reassessment of need

Adult Social Services: Community Alternative Program (CAP)

The community Alternative Program (CAP) is a Medicaid waiver program, which provides an alternative to nursing home placement for those eligible persons.

You or someone you know could be eligible if:

- You would be 18 years or older and at risk of being placed in a nursing facility, or live in a nursing facility and want to return home.
- You require nursing home care, not rest home care
- You are eligible for Medicaid under the CAP/DA guidelines
- You need CAP services to remain safely at home and can do so within the Medicaid cost limit, and
- You want CAP/DA Services instead of institutional care

A nurse/social worker team will assess your social and medical needs and develop a care plan to meet those needs.

CAP Services include:

- Case Management Services(a case manager helps coordinate services, provides information and arranges for community resources)

- In Home Aide Services (Assistance with personal care and basic home management tasks as well as companionship and supervision)
- Medical Equipment and Supplies
- Home mobility Aides (wheelchair ramps, grab bars, handheld showers safety rails)
- Preparation/Delivery of Meals
- Respite Care (short term stay in a facility to provide temporary relief for primary caregivers)
- Telephone Alert
- Adult Day Health Services (Care for adults who need a structured day program of activities and services with nursing supervision)
- Regular Medicaid Services (nursing visits, Physical Therapy, Occupational Therapy, Speech Therapy, and Home health Aid).

Adult Social Services: Guardianship

Guardianship is a legal relationship in which someone (the Guardian) is authorized by the Clerk of Superior Court to be a substitute decision maker for an incompetent adult (the Ward). Incompetence is determined in a court proceeding and means an individual is unable to manage his own affairs, or is unable to make important decisions.

There are three types of guardian:

- Guardian of the person (makes decisions in most areas of the wards life, such as where they live, what type of care they receive)
- Guardian of the Estate (has authority to manage the wards income and property) and
- General Guardian (has the powers and duties of both guardian of the person, and guardian of the estate)

Anyone, including a family member, representative of a department of social services, mental health center, health department, or anyone else who knows the person, may file a written request (a petition) with the Clerk of Superior Court alleging that an adult should be declared incompetent and have a Guardian appointed. Every Clerk's office has forms that may be completed and filed for the petition. Currently, in cooperation with the Clerk and other Human Service Departments, the Adult Services Unit files petitions on individuals who are either indigent, or in need of protection, AND HAVE NO ONE WHO CAN OR WILL ACT IN THEIR BEHALF.

The Department of Social Services currently serves as Guardian for a number of Wards, who either have no family, or none available to serve in that capacity.

Guardianship Services include:

- Case management.
- Monthly assessments of ward's needs (by visiting with the ward, communicating with health providers, and other persons who are involved with the ward).
- Development of a service plan
- Quarterly assessments and yearly assessments.
- File necessary reports with the court/estate division.

Adult Social Services: In Home Aide Services

The goal of In Home Services is to provide needed supportive services to individuals which will enable them to remain in their home for as long as possible.

In Home Aide Services provides home management/and or personal care services to eligible persons. Adult Services currently has a waiting list for In Home Aide service.

In home Aide Services include:

- Social Worker assessment
- Development of a service plan, which identifies needed services.
- Arrangement of services to be provided by Aides employed by various community agencies
- Monitoring of service delivery

Adult Social Services: Intake

The Adult Services Unit has a Social Worker available Monday through Friday 8:00am-5:00pm, to answer phone calls or interview walk-in clients.

Our Intake Social Worker has information not only about DSS provided services but also services provided by other agencies and organizations.

Adult Services Intake Services include:

- Receives reports of abuse, neglect and or exploitation of the disabled.
- Receives complaints regarding Adult Care Homes
- Takes referrals for CAP, In Home, Outreach, Payee, etc
- Refers person to outside community agencies when appropriate
- Makes reports or directs people to law enforcement when appropriate
- Coordinates Medicaid Transportation Services
- Makes arrangements for unclaimed bodies

Adult Social Services: Placement Services

Activities necessary to assist aging or disabled individuals and their families or representatives in finding substitute homes or residential health care facilities suitable to their needs when they are unable to remain in their current living situation.

Placement/Adult Foster Care Services include:

- Initial screening/assessment
- Assisting client/representative in securing needed medical information
- Assisting with completion of necessary financial application
- Help locate and secure placement in suitable setting and level of care

Adult Social Services: Protective Services

Do you have concerns about a disabled adult who is either living in the community or in a licensed facility?

Did you know that there is a law that was enacted in 1975 to protect disabled adults from abuse, neglect and exploitation?

Please read on to understand the NC State statute and Department of Social Services responsibility. Protection of the Abused, Neglected or Exploited Disabled Adult Act is located under NC Statute 108A Article 6.

This statute was initiated to protect the increasing number of disabled adults in North Carolina who are being abused, neglected or exploited.

The statute requires that anyone having reason to believe that a disabled person is in need of protective service shall report such information to the Director of the Department of Social Services.

In Montgomery County you may call (910) 576-6531 between the hours of 8:00am and 5:00pm Monday through Friday. In the event of an emergency after 5:00 weekdays and throughout weekends and holidays you may call 911. You may also make the report in writing. You may remain anonymous, but we encourage you to give us your name in the event additional information is needed. We are prohibited by the statute to give the reporter's name. A Social Worker is available during the above hours to take the information you provide.

The Social Worker will ask numerous questions of you such as but not limited to adult's name, address, age/date of birth, Social Security number, family/collateral names, how is the person disabled, what are the allegations of abuse, neglect or exploitation. The questions asked are important to assure that all appropriate services are made available to the adult.

To accept the referral for Protective Services the information provided must state:

- The adult is physically or mentally incapacitated.
- The adult is being abused, neglected or exploited. If abused, the abuse must be by a caretaker.
- The adult is in need of protection.

This specific criterion is important because Protective Services unlike other services provided by Social Services is initiated without the consent of the adult.

Once a referral is taken for Protective Services, a Social Worker will be assigned the case. They have up to 72 hours to respond to the case, depending on the seriousness of the situation. A DSS Social Worker is responsible for assessment of the situation and determining the need for protection.

The assessment includes evaluating six areas:

- Physical health
- Mental Health
- Social Support
- Activities of daily living and instrumental activities of daily living
- Financial Support; and
- Physical environment

During the course of the evaluation the Social Worker will talk with the adult, collaterals, and use whatever resources necessary to determine whether the adult is in need of protection.

It is important to note that at the end of the assessment the most basic tenet of Adult Protective Service is the right to self-determination.

- This means that as long as the adult can recognize the consequences of decisions they have made about their lives, their right to make those decisions must be respected.
- If the adult is unable to recognize the consequences of his decisions due to mental illness, mental retardation, Alzheimer's, dementia or other cognitive limitation and there is no other responsible party to protect the Adult the Agency is responsible for providing that Protection.

PLEASE, IF YOU HAVE CONCERNS ABOUT A DISABLED PERSON PLEASE CALL (910) 576-6531 AND MAKE A REPORT.

Adult Protective Services Include:

- Initial contact within 24 to 72 hours
- Private Interview with Adult
- Assessment of all functional areas of the adults life
- Collateral contacts
- Decision of need
- A Protective Plan if required
- Referral to Appropriate Services

Adult Social Services: Representative Payee

Our agency serves as Representative Payee for the Social Security and SSI benefits of persons who are unable to manage their resources and have no one else willing or capable to assist them. Social Security and the individual's doctor determine if that individual is not able to manage their finances. If our agency is named as payee for an individual, a Social Worker is assigned to the individual as case manager to provide the following services.

Representative Payee Services include:

- Case management/assessment
- Quarterly contacts
- First priority is to ensure that the individuals day to day needs are met for food and shelter
- Arrangement of payment for existing bills
- Remaining amount can be saved or given to individual for personal items
- File a Representative Payee Report with Social Security about how the benefits were used for the previous year.

Adult Social Services: Services for the Blind

Services to the Blind provide assistance to eligible blind and/or visually impaired persons. This program is administered by the Montgomery County Department of Social Services through contract with the [North Carolina DHHS - Division of Services for the Blind](#).

Services for the Blind Include: (By Appointment Only)

Medical Eye Care and Independent Living Skills. The Medical Eye Care Program offers financial assistance for eye care (eye exams, glasses, medications and surgery) based on clients' medical needs and income.

Independent Living Skills provides an in-home assessment of client's needs related to visual impairments and legal blindness. Services include rehabilitation, mobility training, vocation

assessments, referrals to community resources and family/individual adjustment counseling/education. Eligibility is based on review of a physician's eye report.

Medicaid Transportation

These services are managed by the Adult Services Unit and are authorized for medically related appointments only. To receive this service you must currently be receiving Medicaid. If you would like to request transportation services, please call (910) 576-6531. Please have your current Medicaid card available when you call.

Adult Social Services: Related Links

North Carolina Department of Health and Human Services
<http://www.dhhs.state.nc.us/>

North Carolina DHHS On-line Publications - Protective Services for Adults
<http://info.dhhs.state.nc.us/olm/manuals/dss/afs-07/man/index.htm>

Guardianship:

North Carolina DHHS On-line Publications – Guardianship
<http://info.dhhs.state.nc.us/olm/manuals/dss/afs-08/man/index.htm>

Adult Medicaid:

Assists elderly and disabled individuals with medical care costs.

North Carolina DHHS On-line Publications - Adult Medicaid
<http://info.dhhs.state.nc.us/olm/manuals/dma/abd/man/index.htm>

Adult Care Homes Licensure:

Responsible for licensing and regulating assisted living facilities called Adult Care Homes.

Division of Facility Services – Adult Care Licensure Section
<http://facility-services.state.nc.us/gcpage.htm>

For more information, contact:

Joyce Cockman, Adult Services Unit Supervisor
Email: joyce.cockman@ncmail.net

MONTGOMERY COUNTY EMPLOYEE BENEFIT PACKAGE
EFFECTIVE JULY 2003

HOLIDAYS: 11 - 12 Paid Holidays

VACATION LEAVE: 7 hours & 50 minutes per month. Increases after 2 (9:10), 5, 10, 15, & 20 years, etc. Any days in excess of 30 days as of January 1 shall be converted to Sick Leave.

SICK LEAVE: 8 hours per month. Accumulates indefinitely. Any unused regular and converted sick leave may be counted toward creditable service at retirement.

RETIREMENT: In addition to Social Security participation, membership in the NC Local Governmental Employees Retirement System is mandatory. 6% of your salary is deducted prior to tax. The County match is 4.91%. If you leave before retirement, you may draw out the amount you contributed. Employees are vested after 5 years.

401-K ACCOUNT: The County contributes an amount equal to 5% of your salary to a 401-K account. This supplemental retirement is subject to change with each new budget year. The employee may choose to make additional contributions and controls personal investment selections.

MEDICAL INSURANCE: Blue Cross/Blue Shield is provided at NO cost to the employee (county pays \$363.96/ per month). Additional coverage is available for the following monthly rates:

Full Family: \$682.35 Spouse: \$360.90 Employee/Child: \$174.08

Dental and Vision insurance are included in the employee's insurance plan and may be purchased for the family. The insurance premiums are deducted prior to tax. *There is a 60-day waiting period for medical insurance coverage to go into effect.*

LIFE INSURANCE: The County provides a policy equal to the employee's annualized salary. Dependant coverage is available at \$1.89 per month for \$5,000.

LONGEVITY BONUS: 05-10 years = 1.00% of the employee's annualized salary, paid lump sum following Anniversary Date.

10-15 years = 1.50%
15-20 years = 2.25%
20-25 years = 3.25%
25 years + = 4.50%

OPTIONAL BENEFITS:

- Direct deposit at State Employees Credit Union. Electronic Banking & Payroll deductions for loans, etc. through SECU.
- Additional payroll deductions available for:
 - Deferred Compensation Plan
 - 401K contributions
 - Pre-tax insurance for cancer, disability, flexible spending accounts, etc.
 - Elective supplemental and life insurance

- **Each new employee serves a probationary period. The minimum is three months and a maximum of nine months.**
- DSS is a lead agency in the event of a disaster declaration. Each employee is required to report for **disaster duty when alerted.**
- **Employee mileage** is reimbursed at the rate of .36 per mile. **Meals and lodging** are reimbursed on overnight trips.
- **Over-time & overnight travel** may be required. **Compensatory time** provided.
- **Office hours** are Monday through Friday, 8 AM to 5 PM with one hour for lunch and 15 min. breaks in AM & PM.
- The Department observes a **modified dress code** based on casual business attire.
- **Smoke Free Workplace Policy** is enforced.
- County Employees are **paid** on the 25th of each month.
- **Pre-Employment Drug Screening** is required.

For more information, contact:

Susan Allen, DSS Personnel Assistant

Email: susan.allen@ncmail.net

DISCLAIMER

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Montgomery County Department of Social Services

Attn: James S. "Jim" Sanders, Director

Drawer N

Troy, NC 27371

Email: jim.sanders@ncmail.net



Welcome to the NC Department of Health and Human Services

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¡Nuevo! en español:

[Registros Vitales de Carolina
del Norte](#)

Don't miss our [long-term care
website](#) with links to lots of helpful
information.

The NC Department of Health and Human Services protects the public health, fosters self-reliance and helps the vulnerable. We work in local offices, schools and hospitals, building a stronger North Carolina by strengthening our citizens in all 100 counties.

Learn more about [who we are](#). Visit the web sites for the [divisions and agencies](#) that make up this large department.

Find out about [what we do](#), or visit our [news room](#) to learn about special initiatives and other news coming out of our department.

[Employees and partners](#) of our department can find information just for them.

Confused? Our [topic index](#) is a comprehensive list of all information found on our web pages. Or read our [frequently asked questions](#), or simply [ask us](#).



Read about the development of a
State Plan for Mental Health,
Developmental Disabilities,
and Substance Abuse Services

Last Modified: Wednesday, 26-Nov-03 16:08:59.

NC your service
Visit the North Carolina State Portal